

PM 11/12/15

State of Wisconsin  
Department of Natural Resources  
dnr.wi.gov

**Facility Identification**  
**Air Pollution Control Permit Application**  
Form 4530-100 (R 1/11)

**Notice:** Use of this form is required by the Department for any air pollution control permit application filed pursuant to ss. 285.61, 285.62 or 285.66, Wis. Stats. Completion of this form is mandatory. The Department will not consider or act upon your application unless you complete and submit this application form. You are required to submit two copies in accordance with s. NR 407.05(2), Wis. Adm. Code. Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].

**Facility Information**

Facility Name	Standard Industrial Class Code (SIC)	Facility ID Number (FID)
CLCM St. Francis (was MASD / Kitzinger)	3412	341158070
Street Address (where pollution sources are/will be located)	<input checked="" type="radio"/> City <input type="radio"/> Town <input type="radio"/> Village	County
3950 South Pennsylvania Avenue	of Saint Francis	Milwaukee
Primary Operating Activity (e.g., lead-acid battery manufacturer or sulfite paper mill)	Is the facility located in an area designated as "nonattainment"? <input checked="" type="radio"/> Yes <input type="radio"/> No (refer to instruction booklet)	If yes, indicate the pollutant(s) for the nonattainment designation
Reconditioning steel/plastic drums and totes		Ozone

**Applicant Information**

Applicant Name (provide full business or individual's name)			
CLCM St. Francis (was Mid-America Steel Drum Company, Inc. / Kitzinger)			
Mailing Address	City	State	ZIP Code
3950 South Pennsylvania Avenue	Saint Francis	WI	53235
Parent Corporation or Owner Name (if not wholly owned by applicant)			

**Container Life Cycle Management (CLCM)**

Mailing Address	City	State	ZIP Code	Country (if not U.S.)
3950 South Pennsylvania Avenue	Saint Francis	WI	53235	

Responsible Official Name—person legally responsible for the operation of the permitted air pollution sources [see NR 400.02(80e), Wis. Adm. Code]

Mark Furgason	RECEIVED
Title	Phone Number
St. Francis Site Manager	(414) 483-8800

Permit Contact Person – to be contacted for additional information concerning air pollution sources

Mark Furgason	AIR MANAGEMENT
Title	Phone Number
St. Francis Site Manager	(414) 483-8800

**Permit Information**

**Instructions:** If applying for a construction permit (including modification, reconstruction, relocation, and replacement), you MUST also apply for an operation permit, an operation permit renewal, or an operation permit revision. Select 'Operation Permit' if you currently do not have a facility-wide operation permit. Select 'Operation Permit Renewal' if you are renewing your facility-wide operation permit in conjunction with the proposed project. Otherwise, select 'Operation Permit Revision' so that your facility-wide operation permit will be revised to reflect the proposed project.

**Permit Type:**

☐ Construction Permit

Anticipated construction start date: \_\_\_\_\_ Anticipated operation start date: \_\_\_\_\_  
mm/dd/yy mm/dd/yy

☐ Initial application fee attached (\$7,500)

☐ Construction Permit Exemption and Authority – List appropriate Code citation: \_\_\_\_\_

☐ Construction Permit Revision – List permit to be revised: \_\_\_\_\_

☐ Operation Permit Revision – List permit to be revised: \_\_\_\_\_

☐ Administrative Revision

☐ Minor Revision (must be accompanied by Form 4530-137)

☐ Significant Revision

☒ Operation Permit – select type:

☐ Part 70 Source

☐ Operation Permit Renewal – select type:

☒ Synthetic Minor, Non - Part 70 Source

☐ Non - Part 70 Source

List permit to be renewed: \_\_\_\_\_

☐ Elective Operation Permit (if requesting an operation permit that is otherwise not required)

☐ Operation Permit Exemption and Authority – List appropriate Code citation: \_\_\_\_\_

**Expedited review fee:**

If expedited review requested and fulfilled within the following time periods, the construction permit application fee you will be billed will include a surcharge for this additional service:

☐ 50 days from receipt of completed application for a review not conducted under ch. NR 405 or 408 - \$5,000

☐ 60 days from receipt of completed application for a review conducted under ch. NR 405 or 408 - \$7,500

☐ 90 days from receipt of completed application for a review conducted under ch. NR 405 or 408 - \$4,000

Is additional information attached?

☒ Yes ☐ No

Are two copies of completed form and additional information included?

☒ Yes ☐ No



State of Wisconsin  
Department of Natural Resources

FACILITY PLOT PLAN  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-101 12-99

Use of this form is required by the Department for any air pollution control permit application filed pursuant to s. 144.392 or 144.3925, Wis Stats. Completion of this form is mandatory. The Department will not consider or act upon your application unless you complete and submit this form. It is not the Department's intention to use any personally identifiable information from this form for any other purpose.

In order for a comprehensive air quality analysis to be accomplished, a facility plot plan MUST be included with the permit application. If the application is for an initial operation permit, submit the elements under #2 below. If the application is for a renewal, answer #1 below first.

- Have there been changes to the facility plot plan since the previous operation permit application was submitted?
  - ☐ No. The plot plan submitted with the original application can be used for the renewal.
  - ☒ Yes. An up-to-date plot plan is attached.
- If there have been changes to the facility plot plan since the last operation permit application submittal, RESUBMIT an up-to-date plot plan which must include the following or the permit application will be deemed incomplete:

**FOR DEPARTMENT USE ONLY**

COMPLETE	INCOMPLETE	NOT APPLICABLE
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	

- A building layout (blueprint, plan view) including all buildings occupied by or located on the site of the facility.
- The maximum height of each building (excluding stack height).
- The location and numerical designation of each stack. Please ensure these designations correspond to the appropriate stacks listed on the other permit forms in this application.
- The location of fenced property lines (if any).
- Identify direction "North" on all submittals.
- All drawings shall be to scale and shall have the scale graphically depicted.
- An additional regional map depicting the facility location in relation to the surrounding vicinity (roads or other features) shall be included.

Are there any outdoor storage piles on the facility site?

☐ Yes ☒ No

If so, what material does the pile(s) consist of?

Are there any dirt roads or unpaved parking lots on the facility site?

☒ Yes ☐ No



State of Wisconsin  
Department of Natural Resources

SOURCE AND SITE DESCRIPTIONS  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-102 12-99 Information attached? N (y/n)

Use of this form is required by the Department for any air pollution control permit application filed pursuant to s. 144.392 or 144.3925, Wis Stats. Completion of this form is mandatory. The Department will not consider or act upon your application unless you complete and submit this form. It is not the Department's intention to use any personally identifiable information from this form for any other purpose.

1. Briefly describe the proposed project or existing Unit(s) to be permitted. Attach supplemental forms as needed.

This application is for a number of changes at the Pennsylvania Avenue site, and removal of all equipment from the Norwich Avenue location. For the proposed changes, see form 4530-102A.

For Renewal Applications:

1. Were any new or modified emissions units installed/modified at the facility since the last operation permit issuance date?

- ☒ No. Proceed to form 4530-102A.  
☐ Yes. Answer the following questions:

2. Briefly describe any new/modified emissions units installed at the facility since the last operation permit issuance date and include the following information. Attach supplemental forms as needed.

- a. List the Department issued construction and/or operation permit number as applicable (identifying which units were covered by which permit if multiple permits issued).

- i. If operation permit application forms were submitted for the new emission unit(s) covered by the construction permit mentioned above, reference the date of that application.
- ii. For Part 70 Sources Only: If no operation permit application forms were submitted for the new emissions unit(s) covered by the construction permit mentioned above, complete the appropriate forms 4530-118 through 4530-125.

- b. Include the Department issued construction permit exemption number, if one was assigned, or reference the date of the letter of the exemption.

2. Site Description

The Pennsylvania Avenue St. Francis facility's primary business is reconditioning used (empty) metal industrial drums. The containers are inspected cleaned, refurbished, leak-tested, painted, and resold.

State of Wisconsin  
Department of Natural Resources

SOURCE DESCRIPTION - SUPPLEMENTAL  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-102A 12-99 Information attached? N (y/n)

Use of this form is required by the Department for any air pollution control permit application filed pursuant to s. 144.392 or 144.3925, Wis Stats. Completion of this form is mandatory. The Department will not consider or act upon your application unless you complete and submit this form. It is not the Department's intention to use any personally identifiable information from this form for any other purpose.

1. List all significant existing or proposed air pollution units, operations, and activities at the facility. A short narrative of the inventory of air pollution emissions unit (e.g., boiler, printing line, etc.) followed by equipment specifications will suffice. If the facility consists of several individual emission units, present this information in an outline format. (See instruction booklet for an example Unit description.)

Pennsylvania Avenue (Only – No Norwich Avenue Operations)

The following equipment/operations was/will be added.

- (a) Natural gas fired Closed Drum Drying Oven (P50C)[relocated from Norwich Avenue site]
- (b) Auto Exterior Drum Spray Booth (P32C) [relocated from Norwich Avenue site]
- (c) Natural gas fired Curing Oven (P32B) [relocated from Norwich Avenue site]
- (d) Caustic Wet Scrubber (C10) and associated stack S98 [replaces wet scrubber C21 and stack S21]
- (e) Acid Wet Scrubber (C70)
- (f) Bung Wash (P11)
- (g) Natural gas-fired 2.0 MMBtu/hr Water Heater (P12) and Stack S92 [exhausts natural gas combustion products]
- (h) Natural gas-fired 2.0 MMBtu/hr Water Heater (P13) and Stack S93 [exhausts natural gas combustion products]
- (i) Natural gas-fired 3.6 MMBtu/hr Caustic Heater (P14) and Stack S94 [exhausts natural gas combustion products]
- (j) Natural gas-fired 2.0 MMBtu/hr Caustic Heater and 2,000-gallon tank (P15) and Stack S95 [exhausts natural gas combustion products]
- (k) Label Remover High Pressure Washer (P16)
- (l) Delabeling (P71) [steel drums only]
- (m) Exterior Wash/Soaker (P72) [steel drums only]
- (n) Exterior Rinse (P73) [steel drums only]
- (o) Internal Double Split Washer (P74) [steel drums only]
- (p) Acidizer (P75)
- (q) Internal Drum Washer (P42) – replaces existing Internal Drum Washer (P42)

The following operations has/will have updated venting configurations.

- (i) Interior Caustic Preflush (P80A) – vents to scrubber C10
- (ii) Exterior Washer/Soaker (P80B) – vents to scrubber C10
- (iii) Exterior Rinse (P80C) – vents to scrubber C10
- (iv) Natural gas-fired 0.6 MMBtu/hr Drying Oven Flamer (P41) – vents to a new stack S96

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SOURCE DESCRIPTION - SUPPLEMENTAL  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-102A 12-99 Information attached? N (y/n)

Use of this form is required by the Department for any air pollution control permit application filed pursuant to s. 144.392 or 144.3925, Wis Stats. Completion of this form is mandatory. The Department will not consider or act upon your application unless you complete and submit this form. It is not the Department's intention to use any personally identifiable information from this form for any other purpose.

1. List all significant existing or proposed air pollution units, operations, and activities at the facility. A short narrative of the inventory of air pollution emissions unit (e.g., boiler, printing line, etc.) followed by equipment specifications will suffice. If the facility consists of several individual emission units, present this information in an outline format. (See instruction booklet for an example Unit description.)

(continued)

The following emission units/operations will no longer be at Pennsylvania Avenue site.

- (A) 2.5 MMBtu/hr natural gas-fired Hot Caustic Heater (P90A) and stack S67
- (B) 2.5 MMBtu/hr natural gas-fired Hot Caustic Heater (P90B) and stack S68
- (C) 2.5 MMBtu/hr natural gas-fired Hot Water Heater (P90C) and stack S69
- (D) 1.75 MMBtu/hr natural gas-fired Hot Water Heater (P42A) and stack S64
- (E) 1.75 MMBtu/hr natural gas-fired Hot Water Heater (P42B) and stack S63
- (F) 1.75 MMBtu/hr Hot Caustic Heater portion of P80A and stack S60
- (G) 1.75 MMBtu/hr Hot Caustic Heater portion of P80B and stack S61

For Renewal Applications:

N/A

1. If there were any new or modified emissions units installed/modified at the facility since the last operation permit issuance date:
  - a. If any of these new/modified units were exempt from construction permit requirements, but ....
  - b. If any of the new/modified units are insignificant emissions units list them on form 4530-102B.
  - c. If any of the new/modified emissions units do not fit any of the above categories, fill out ... as follows:
    - i. For Part 70 Sources: Fill out the appropriate forms 4530-103 through 4530-133; OR
    - ii. For Synthetic Minor Non Part-70 Sources and Non-Part 70 Sources: Fill out the appropriate forms 4530-103 through 4530-117 and 4530-126 through 4530-129.



State of Wisconsin  
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SOURCE DESCRIPTION - SUPPLEMENTAL  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-102B 12-99 Information attached? N (y/n)

Use of this form is required by the Department for any air pollution control permit application filed pursuant to s. 144.392 or 144.3925, Wis Stats. Completion of this form is mandatory. The Department will not consider or act upon your application unless you complete and submit this form. It is not the Department's intention to use any personally identifiable information from this form for any other purpose.

1. Mark all insignificant existing or proposed air pollution units, operations, and activities at the facility listed below. If not listed, provide a short narrative of the inventory of air pollution emissions unit (e.g., boiler, printing line, etc.) followed by equipment specifications. If the facility consists of several individual emission units, present this information in an outline format. **For Renewal Applications, identify those that are new since the last update to your application.** (See instruction booklet for an example Unit description.)

☒ Maintenance of Grounds, Equipment, and Buildings (lawn care, painting, etc.)

☐ Boiler, Turbine, and HVAC System Maintenance

☒ Pollution Control Equipment Maintenance

☒ Internal Combustion Engines Used for Warehousing and Material Transport

☐ Fire Control Equipment

☒ Janitorial Activities

☒ Office Activities

☒ Convenience Water Heating

☒ Convenience Space Heating (< 5 million BTU/hr Burning Gas, Liquid, or Wood)

☐ Fuel Oil Storage Tanks (< 10,000 gal.)

☐ Stockpiled Contaminated Soils

☐ Demineralization and Oxygen Scavenging of Water for Boilers

☐ Purging of Natural Gas Lines

☒ Sanitary Sewer and Plumbing Venting

☒ Fiber Drum Cleaning / Drum Cleaning

☒ Vacuum – Closed Drum Blaster

☒ Rotary Barrel Washing Operation

☒ Barrel Inside Air Purge

☒ Process P76: Shotblaster (Steel)  
Control C76: Baghouse

☒ Other Non-Emissions Processes Venting to C10:  
Settling Tank 1, Settling Tank 2, Oil Water  
Separator, Used Oil Tank, Oil Treatment  
Tank, Poly Auto Purge 1, Poly Auto Purge 2,  
Water Treatment System



State of Wisconsin  
Department of Natural Resources

STACK IDENTIFICATION  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-103 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070	3. Stack identification number: See Attached Table 17
4. Exhausting Unit(s), use Unit identification number from appropriate Form(s) 4530-104, 106, 107, 108 and/or 109		
4530-104	4530-106	4530-107
		4530-108
		4530-109
5. Identify this stack on the plot plan required on Form 4530-101		
6. Indicate by checking:		
<input type="checkbox"/> This stack has an actual exhaust point. <input type="checkbox"/> This stack serves to identify fugitive emissions.		
If this stack has an actual exhaust point, then provide the following stack parameters		
7. Discharge height above ground level: ____ (feet)		
8. Inside dimensions at outlet (check one and complete):		
<input type="checkbox"/> Circular ____ (feet) <input type="checkbox"/> rectangular ____ length (feet) ____ width (feet)		
9. Exhaust flow rate:		
Normal ____ (ACFM)         Maximum ____ (ACFM)		
10. Exhaust gas temperature (normal): ____ (EF)		
11. Exhaust gas moisture content: Normal ____ volume percent Maximum ____ volume percent		
12. Exhaust gas discharge direction: <input type="checkbox"/> Up <input type="checkbox"/> Down <input type="checkbox"/> Horizontal		
13. Is this stack equipped with a rainhat or any obstruction to the free flow of the exhaust gases from the stack? <input type="checkbox"/> Yes <input type="checkbox"/> No		
***** Complete the appropriate Air Permit Application Forms(s) 4530-104, 106, 107, 108 or 109 for each Unit exhausting through this stack. *****		

State of Wisconsin  
Department of Natural Resources

PAINTING AND COATING OPERATIONS  
AIR POLLUTION CONTROL PERMIT APPLICATION

Form 4530-108 11-93

Information attached? Y (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S12C through C32C	4. Process number: P32C
4a. Unit description: Auto Exterior Drum Spray Booth	
5. Indicate the control technology status. <input type="checkbox"/> Uncontrolled <input checked="" type="checkbox"/> Controlled	
If the process is controlled, enter the control device number(s) from the appropriate form(s):	
4530-110 <u>C32C</u>	4530-111 _____ 4530-112 _____ 4530-113 _____
4530-114 _____	4530-115 _____ 4530-116 _____ 4530-117 _____
6. Application technique and transfer efficiency (%): Airless Lance, 50% Transfer Efficiency	
7. Date of construction or last modification: Installed at Norwich Ave. Location: In 2005 after fire Move to Pennsylvania Ave. Location: 2015	
8. Normal operating schedule: <u>16</u> hrs/day <u>5</u> days/wk <u>260</u> days/yr	
9. Oven curing (complete if applicable):	
Number of ovens <u>N/A</u> Specify oven fuels _____	
Total Maximum Energy input to each oven: _____	

10. Describe all of the coatings' and solvents' composition (as applied) that are used by this unit.

Name of coating	ct cg	T	Maximum usage		Normal usage	Solids %		VOC %		Water %		Coating or VOC Density	Pounds VOC/ gallon less H <sub>2</sub> O
a.	b.	c.	d.		e.	f.		g.		h.		i.	j.
			gal/hr	gal/yr	gal/yr	W	V	W	V	W	V	lbs/gal	

See attached Table 18 for a summary of typical coatings with VOC contents

Paints	3		11.60	38,400	11,500								
Total coatings													

List the thinning solvents used with the coatings identified above.

Clean-up solvents Acetone			2.85			0		0		0		0	
Clean-up solvents													
Other (specify)													

\*\*\*\*\* For this emissions unit, identify the method of compliance demonstration by completing Form 4530-118, \*\*\*\*\*  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118  
and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.

\*\*\*\*\* Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. \*\*\*\*\*

Coating categories (ct, cg, - column b. above) should be entered as follows: 1 - for air dried coatings; 2 - for clear coatings; 3 - for cured coatings; 4 - for extreme performance coatings; 5 - for other (specify)

State of Wisconsin  
Department of Natural Resources

MISCELLANEOUS PROCESSES  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-109 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S98 through C10	4. Process number: P11, P12, P13, P14, P15, P16, P41, P42, P72, P73, P74, P80A (per one of two units), P80C, P95

4a. Unit description: Processes venting to new Wet Caustic Scrubber

5. Indicate the control technology status. ☐ Uncontrolled ☒ Controlled

If the process is controlled, enter the control device number(s) from the appropriate form(s):

4530-110 \_\_\_\_\_ 4530-111 \_\_\_\_\_ 4530-112 \_\_\_\_\_ 4530-113 \_\_\_\_\_

4530-114 \_\_\_\_\_ 4530-115 \_\_\_\_\_ 4530-116 X 4530-117 \_\_\_\_\_

6. Source Classification Code (SCC):

7. Date of construction or last modification: 2015

8. Normal operating schedule: 16 hrs/day 5 days/wk 260 days/yr

9. Describe this process (please attach a flow diagram of the process).

Processes venting to new Wet Caustic Scrubber

Attached?

Yes

10. List the types and amounts of raw materials used in this process:

Material	Storage/material handling process	Average usage	Units	Maximum usage	Units
Caustic (NaOH) (all units combined)	Stored in Drums	215,000	lb/yr	123.08	lb/hr
				512,000	lb/yr

11. List the types and amounts of finished products:

Material	Storage/material handling process	Average amount produced	Units	Maximum amount produced	Units
Drums	Transported via conveyor	300,000	drums/yr	300	drums/hr

12. Process fuel usage:

Type of fuel	Maximum heat input to process million BTU/hr.	Average usage	Units	Maximum usage	Units

13. Describe any fugitive emissions associated with this process, such as outdoor storage piles, unpaved roads, open conveyors, etc.: N/A

Attached?

N/A

\*\*\*\*\* For this emissions unit, identify the method(s) of compliance demonstration by completing Form 4530-118, \*\*\*\*\*  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118  
and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.

\*\*\*\*\* Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. \*\*\*\*\*

State of Wisconsin  
Department of Natural Resources

MISCELLANEOUS PROCESSES  
AIR POLLUTION CONTROL PERMIT APPLICATION

Form 4530-109 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S92	4. Process number: P12

4a. Unit description: Water Heater 4 (combustion emissions)

5. Indicate the control technology status. ☒ Uncontrolled ☐ Controlled

If the process is controlled, enter the control device number(s) from the appropriate form(s):

4530-110 \_\_\_\_\_ 4530-111 \_\_\_\_\_ 4530-112 \_\_\_\_\_ 4530-113 \_\_\_\_\_

4530-114 \_\_\_\_\_ 4530-115 \_\_\_\_\_ 4530-116 \_\_\_\_\_ 4530-117 \_\_\_\_\_

6. Source Classification Code (SCC):

7. Date of construction or last modification: 2015

8. Normal operating schedule: 16 hrs/day 5 days/wk 260 days/yr

9. Describe this process (please attach a flow diagram of the process).

Attached?

Water Heater 4 (combustion emissions)

Yes

10. List the types and amounts of raw materials used in this process:

Material	Storage/material handling process	Average usage	Units	Maximum usage	Units

11. List the types and amounts of finished products:

Material	Storage/material handling process	Average amount produced	Units	Maximum amount produced	Units
Drums	Transported via conveyor	300,000	drums/yr	300	drums/hr

12. Process fuel usage: Natural Gas

Type of fuel	Maximum heat input to process million BTU/hr.	Average usage	Units	Maximum usage	Units
Natural Gas	2.0	8.32	mmft <sup>3</sup> /yr	17.52	mmft <sup>3</sup> /yr

13. Describe any fugitive emissions associated with this process, such as outdoor storage piles, unpaved roads, open conveyors, etc.: N/A

Attached?

N/A

\*\*\*\*\* For this emissions unit, identify the method(s) of compliance demonstration by completing Form 4530-118, \*\*\*\*\*

DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118

and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.

\*\*\*\*\* Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. \*\*\*\*\*

State of Wisconsin  
Department of Natural Resources

MISCELLANEOUS PROCESSES  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-109 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: <u>CLCM St. Francis</u>	2. Facility identification number: <u>341158070</u>				
3. Stack identification number: <u>S93</u>	4. Process number: <u>P13</u>				
4a. Unit description: <u>Oil/Water Heater 3 (combustion emissions)</u>					
5. Indicate the control technology status. <input checked="" type="checkbox"/> Uncontrolled <input type="checkbox"/> Controlled If the process is controlled, enter the control device number(s) from the appropriate form(s): 4530-110 _____ 4530-111 _____ 4530-112 _____ 4530-113 _____ 4530-114 _____ 4530-115 _____ 4530-116 _____ 4530-117 _____					
6. Source Classification Code (SCC): _____					
7. Date of construction or last modification: <u>2015</u>					
8. Normal operating schedule: <u>16</u> hrs/day <u>5</u> days/wk <u>260</u> days/yr					
9. Describe this process (please attach a flow diagram of the process). <u>Oil/Water Heater 3 (combustion emissions)</u>	Attached? Yes				
10. List the types and amounts of raw materials used in this process:					
Material	Storage/material handling process	Average usage	Units	Maximum usage	Units
11. List the types and amounts of finished products:					
Material	Storage/material handling process	Average amount produced	Units	Maximum amount produced	Units
Drums	Transported via conveyor	300,000	drums/yr	300	drums/hr
12. Process fuel usage: <u>Natural Gas</u>					
Type of fuel	Maximum heat input to process million BTU/hr.	Average usage	Units	Maximum usage	Units
Natural Gas	2.0	8.32	mmft <sup>3</sup> /yr	17.52	mmft <sup>3</sup> /yr
13. Describe any fugitive emissions associated with this process, such as outdoor storage piles, unpaved roads, open conveyors, etc.: <u>N/A</u>				Attached? N/A	
***** For this emissions unit, identify the method(s) of compliance demonstration by completing Form 4530-118, ***** DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118 and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.					
***** Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. *****					

State of Wisconsin  
Department of Natural Resources

MISCELLANEOUS PROCESSES  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-109 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S94	4. Process number: P14

4a. Unit description: Caustic Heater 2 (combustion emissions)

5. Indicate the control technology status. ☒ Uncontrolled ☐ Controlled

If the process is controlled, enter the control device number(s) from the appropriate form(s):

4530-110 \_\_\_\_\_ 4530-111 \_\_\_\_\_ 4530-112 \_\_\_\_\_ 4530-113 \_\_\_\_\_

4530-114 \_\_\_\_\_ 4530-115 \_\_\_\_\_ 4530-116 \_\_\_\_\_ 4530-117 \_\_\_\_\_

6. Source Classification Code (SCC):

7. Date of construction or last modification: 2015

8. Normal operating schedule: 16 hrs/day 5 days/wk 260 days/yr

9. Describe this process (please attach a flow diagram of the process).

Caustic Heater 2 (combustion emissions)

Attached?

Yes

10. List the types and amounts of raw materials used in this process:

Material	Storage/material handling process	Average usage	Units	Maximum usage	Units

11. List the types and amounts of finished products:

Material	Storage/material handling process	Average amount produced	Units	Maximum amount produced	Units
Drums	Transported via conveyor	300,000	drums/yr	300	drums/hr

12. Process fuel usage: Natural Gas

Type of fuel	Maximum heat input to process million BTU/hr.	Average usage	Units	Maximum usage	Units
Natural Gas	3.6	14.98	mmft <sup>3</sup> /yr	31.54	mmft <sup>3</sup> /yr

13. Describe any fugitive emissions associated with this process, such as outdoor storage piles, unpaved roads, open conveyors, etc.: N/A

Attached?

N/A

\*\*\*\*\* For this emissions unit, identify the method(s) of compliance demonstration by completing Form 4530-118, \*\*\*\*\*  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118  
and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.

\*\*\*\*\* Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. \*\*\*\*\*

State of Wisconsin  
Department of Natural Resources

MISCELLANEOUS PROCESSES  
AIR POLLUTION CONTROL PERMIT APPLICATION

Form 4530-109 11-93

Information attached? N (y/n)

## SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis		2. Facility identification number: 341158070			
3. Stack identification number: S95		4. Process number: P15			
4a. Unit description: Caustic Heater 1 and 2,000-Gallon Tank (combustion emissions)					
5. Indicate the control technology status. <input checked="" type="checkbox"/> Uncontrolled <input type="checkbox"/> Controlled					
If the process is controlled, enter the control device number(s) from the appropriate form(s):					
4530-110 _____	4530-111 _____	4530-112 _____	4530-113 _____		
4530-114 _____	4530-115 _____	4530-116 _____	4530-117 _____		
6. Source Classification Code (SCC):					
7. Date of construction or last modification: 2015					
8. Normal operating schedule: 16 hrs/day 5 days/wk 260 days/yr					
9. Describe this process (please attach a flow diagram of the process). Caustic Heater 1 and 2,000-Gallon Tank (combustion emissions)			Attached? Yes		
10. List the types and amounts of raw materials used in this process:					
Material	Storage/material handling process	Average usage	Units	Maximum usage	Units
11. List the types and amounts of finished products:					
Material	Storage/material handling process	Average amount produced	Units	Maximum amount produced	Units
Drums	Transported via conveyor	300,000	drums/yr	300	drums/hr
12. Process fuel usage: Natural Gas					
Type of fuel	Maximum heat input to process million BTU/hr.	Average usage	Units	Maximum usage	Units
Natural Gas	2.0	8.32	mmft <sup>3</sup> /yr	17.52	mmft <sup>3</sup> /yr
13. Describe any fugitive emissions associated with this process, such as outdoor storage piles, unpaved roads, open conveyors, etc.: N/A				Attached? N/A	
***** For this emissions unit, identify the method(s) of compliance demonstration by completing Form 4530-118, ***** DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118 and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.					
***** Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. *****					

State of Wisconsin  
Department of Natural Resources

MISCELLANEOUS PROCESSES  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-109 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S96	4. Process number: P41

4a. Unit description: Drying Oven/Flamer (combustion emissions)

5. Indicate the control technology status. ☒ Uncontrolled ☐ Controlled

If the process is controlled, enter the control device number(s) from the appropriate form(s):

4530-110 \_\_\_\_\_ 4530-111 \_\_\_\_\_ 4530-112 \_\_\_\_\_ 4530-113 \_\_\_\_\_

4530-114 \_\_\_\_\_ 4530-115 \_\_\_\_\_ 4530-116 \_\_\_\_\_ 4530-117 \_\_\_\_\_

6. Source Classification Code (SCC):

7. Date of construction or last modification: Installed: July 1995, Modified: 2015

8. Normal operating schedule: 16 hrs/day 5 days/wk 260 days/yr

9. Describe this process (please attach a flow diagram of the process).

Attached?

Drying Oven/Flamer (combustion emissions)

Yes

10. List the types and amounts of raw materials used in this process:

Material	Storage/material handling process	Average usage	Units	Maximum usage	Units

11. List the types and amounts of finished products:

Material	Storage/material handling process	Average amount produced	Units	Maximum amount produced	Units
Drums	Transported via conveyor	300,000	drums/yr	300	drums/hr

12. Process fuel usage: Natural Gas

Type of fuel	Maximum heat input to process million BTU/hr.	Average usage	Units	Maximum usage	Units
Natural Gas	0.6	2.50	mmft <sup>3</sup> /yr	5.26	mmft <sup>3</sup> /yr

13. Describe any fugitive emissions associated with this process, such as outdoor storage piles, unpaved roads, open conveyors, etc.: N/A

Attached?

N/A

\*\*\*\*\* For this emissions unit, identify the method(s) of compliance demonstration by completing Form 4530-118, \*\*\*\*\*  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118  
and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.

\*\*\*\*\* Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. \*\*\*\*\*

State of Wisconsin  
Department of Natural Resources

MISCELLANEOUS PROCESSES  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-109 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S62	4. Process number: P42C

4a. Unit description: Hot Water Heater

5. Indicate the control technology status. ☒ Uncontrolled ☐ Controlled

If the process is controlled, enter the control device number(s) from the appropriate form(s):

4530-110 \_\_\_\_\_ 4530-111 \_\_\_\_\_ 4530-112 \_\_\_\_\_ 4530-113 \_\_\_\_\_  
4530-114 \_\_\_\_\_ 4530-115 \_\_\_\_\_ 4530-116 \_\_\_\_\_ 4530-117 \_\_\_\_\_

6. Source Classification Code (SCC):

7. Date of construction or last modification: July 1995

8. Normal operating schedule: 16 hrs/day 5 days/wk 260 days/yr

9. Describe this process (please attach a flow diagram of the process).

Hot Water Heater

Attached?

Yes

10. List the types and amounts of raw materials used in this process:

Material	Storage/material handling process	Average usage	Units	Maximum usage	Units

11. List the types and amounts of finished products:

Material	Storage/material handling process	Average amount produced	Units	Maximum amount produced	Units
Drums	Transported via conveyor	300,000	drums/yr	300	drums/hr

12. Process fuel usage: Natural Gas

Type of fuel	Maximum heat input to process million BTU/hr.	Average usage	Units	Maximum usage	Units
Natural Gas	1.75	7.28	mmft <sup>3</sup> /yr	15.33	mmft <sup>3</sup> /yr

13. Describe any fugitive emissions associated with this process, such as outdoor storage piles, unpaved roads, open conveyors, etc.: N/A

Attached?

N/A

\*\*\*\*\* For this emissions unit, identify the method(s) of compliance demonstration by completing Form 4530-118, \*\*\*\*\*  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118  
and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.

\*\*\*\*\* Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. \*\*\*\*\*

State of Wisconsin  
Department of Natural Resources

MISCELLANEOUS PROCESSES  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-109 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S45 (Fugitive)	4. Process number: P45

4a. Unit description: Drum Wipe Cleaning

5. Indicate the control technology status. ☒ Uncontrolled ☐ Controlled

If the process is controlled, enter the control device number(s) from the appropriate form(s):

4530-110 \_\_\_\_\_ 4530-111 \_\_\_\_\_ 4530-112 \_\_\_\_\_ 4530-113 \_\_\_\_\_

4530-114 \_\_\_\_\_ 4530-115 \_\_\_\_\_ 4530-116 \_\_\_\_\_ 4530-117 \_\_\_\_\_

6. Source Classification Code (SCC):

7. Date of construction or last modification: July 1995

8. Normal operating schedule: 16 hrs/day 5 days/wk 260 days/yr

9. Describe this process (please attach a flow diagram of the process).

Drums are solvent cleaned prior to shipping

Attached?

Yes

10. List the types and amounts of raw materials used in this process:

Material	Storage/material handling process	Average usage	Units	Maximum usage	Units
Solvent (non-methylene chloride)	Stored in drums	5,200	gal/yr	7,800	gal/yr
				3.75	gal/hr

11. List the types and amounts of finished products:

Material	Storage/material handling process	Average amount produced	Units	Maximum amount produced	Units
Drums	Transported via conveyor	300,000	drums/yr	300	drums/hr

12. Process fuel usage: N/A

Type of fuel	Maximum heat input to process million BTU/hr.	Average usage	Units	Maximum usage	Units
None					

13. Describe any fugitive emissions associated with this process, such as outdoor storage piles, unpaved roads, open conveyors, etc.: N/A

Attached?

N/A

\*\*\*\*\* For this emissions unit, identify the method(s) of compliance demonstration by completing Form 4530-118, \*\*\*\*\*  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118  
and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.

\*\*\*\*\* Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. \*\*\*\*\*

State of Wisconsin  
Department of Natural Resources

MISCELLANEOUS PROCESSES  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-109 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S91 (Fugitive)	4. Process number: P71
4a. Unit description: De-Labeling	
5. Indicate the control technology status. <input checked="" type="checkbox"/> Uncontrolled <input type="checkbox"/> Controlled	
If the process is controlled, enter the control device number(s) from the appropriate form(s):	
4530-110 _____	4530-111 _____
4530-112 _____	4530-113 _____
4530-114 _____	4530-115 _____
4530-116 _____	4530-117 _____

6. Source Classification Code (SCC):	
7. Date of construction or last modification: 2015	
8. Normal operating schedule: <u>16</u> hrs/day <u>5</u> days/wk <u>260</u> days/yr	
9. Describe this process (please attach a flow diagram of the process). De-Labeling	Attached? Yes

10. List the types and amounts of raw materials used in this process:					
Material	Storage/material handling process	Average usage	Units	Maximum usage	Units
Acetone	Stored in drums	5,200	gal/yr	7,800	gal/yr
				3.75	gal/hr

11. List the types and amounts of finished products:					
Material	Storage/material handling process	Average amount produced	Units	Maximum amount produced	Units
Drums	Transported via conveyor	300,000	drums/yr	300	drums/hr

12. Process fuel usage: N/A					
Type of fuel	Maximum heat input to process million BTU/hr.	Average usage	Units	Maximum usage	Units
None					

13. Describe any fugitive emissions associated with this process, such as outdoor storage piles, unpaved roads, open conveyors, etc.: N/A	Attached? N/A
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\*\*\*\*\* For this emissions unit, identify the method(s) of compliance demonstration by completing Form 4530-118, \*\*\*\*\*  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118  
and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.

\*\*\*\*\* Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. \*\*\*\*\*

State of Wisconsin  
Department of Natural Resources

MISCELLANEOUS PROCESSES  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-109 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S97 through C70	4. Process number: P75

4a. Unit description: Acidizer venting to Wet Acid Scrubber

5. Indicate the control technology status. ☐ Uncontrolled ☒ Controlled

If the process is controlled, enter the control device number(s) from the appropriate form(s):

4530-110 \_\_\_\_\_ 4530-111 \_\_\_\_\_ 4530-112 \_\_\_\_\_ 4530-113 \_\_\_\_\_

4530-114 \_\_\_\_\_ 4530-115 \_\_\_\_\_ 4530-116 X 4530-117 \_\_\_\_\_

6. Source Classification Code (SCC):

7. Date of construction or last modification: 2015

8. Normal operating schedule: 16 hrs/day 5 days/wk 260 days/yr

9. Describe this process (please attach a flow diagram of the process).

Attached?

Acidizer venting to Wet Acid Scrubber

Yes

10. List the types and amounts of raw materials used in this process:

Material	Storage/material handling process	Average usage	Units	Maximum usage	Units
20 Degrees Baume / 31.45% Concentrated Hydrochloric Acid	Stored in Drums	2,000	lb/mo	14.90	lb/hr
				62,000	lb/yr

11. List the types and amounts of finished products:

Material	Storage/material handling process	Average amount produced	Units	Maximum amount produced	Units
Drums	Transported via conveyor	300,000	drums/yr	300	drums/hr

12. Process fuel usage: N/A

Type of fuel	Maximum heat input to process million BTU/hr.	Average usage	Units	Maximum usage	Units

13. Describe any fugitive emissions associated with this process, such as outdoor storage piles, unpaved roads, open conveyors, etc.: N/A

Attached?

N/A

\*\*\*\*\* For this emissions unit, identify the method(s) of compliance demonstration by completing Form 4530-118, \*\*\*\*\*  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118  
and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.

\*\*\*\*\* Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. \*\*\*\*\*

State of Wisconsin  
Department of Natural Resources

MISCELLANEOUS PROCESSES  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-109 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S53	4. Process number: P50C

4a. Unit description: Closed Drum Drying Oven

5. Indicate the control technology status. ☒ Uncontrolled ☐ Controlled

If the process is controlled, enter the control device number(s) from the appropriate form(s):

4530-110 \_\_\_\_\_ 4530-111 \_\_\_\_\_ 4530-112 \_\_\_\_\_ 4530-113 \_\_\_\_\_  
4530-114 \_\_\_\_\_ 4530-115 \_\_\_\_\_ 4530-116 \_\_\_\_\_ 4530-117 \_\_\_\_\_

6. Source Classification Code (SCC):

7. Date of construction or last modification: Installed at Norwich Ave. Location: In 2005 after fire, Move to Pennsylvania Ave. Location: 2015

8. Normal operating schedule: 16 hrs/day 5 days/wk 260 days/yr

9. Describe this process (please attach a flow diagram of the process).

Closed Drum Drying Oven

Attached?

Yes

10. List the types and amounts of raw materials used in this process:

Material	Storage/material handling process	Average usage	Units	Maximum usage	Units

11. List the types and amounts of finished products:

Material	Storage/material handling process	Average amount produced	Units	Maximum amount produced	Units
Drums	Transported via conveyor	300,000	drums/yr	300	drums/hr

12. Process fuel usage: Natural Gas

Type of fuel	Maximum heat input to process million BTU/hr.	Average usage	Units	Maximum usage	Units
Natural Gas	0.6	2.50	mmft <sup>3</sup> /yr	5.26	mmft <sup>3</sup> /yr

13. Describe any fugitive emissions associated with this process, such as outdoor storage piles, unpaved roads, open conveyors, etc.: N/A

Attached?

N/A

\*\*\*\*\* For this emissions unit, identify the method(s) of compliance demonstration by completing Form 4530-118, \*\*\*\*\*  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118  
and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.

\*\*\*\*\* Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. \*\*\*\*\*

State of Wisconsin  
Department of Natural Resources

MISCELLANEOUS PROCESSES  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-109 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S12B	4. Process number: P32B

4a. Unit description: Curing Oven

5. Indicate the control technology status. ☒ Uncontrolled ☐ Controlled

If the process is controlled, enter the control device number(s) from the appropriate form(s):

4530-110 \_\_\_\_\_ 4530-111 \_\_\_\_\_ 4530-112 \_\_\_\_\_ 4530-113 \_\_\_\_\_  
4530-114 \_\_\_\_\_ 4530-115 \_\_\_\_\_ 4530-116 \_\_\_\_\_ 4530-117 \_\_\_\_\_

6. Source Classification Code (SCC):

7. Date of construction or last modification: Installed at Norwich Ave. Location: In 2005 after fire, Move to Pennsylvania Ave. Location: 2015

8. Normal operating schedule: 16 hrs/day 5 days/wk 260 days/yr

9. Describe this process (please attach a flow diagram of the process).  
Curing Oven

Attached?  
Yes

10. List the types and amounts of raw materials used in this process:

Material	Storage/material handling process	Average usage	Units	Maximum usage	Units

11. List the types and amounts of finished products:

Material	Storage/material handling process	Average amount produced	Units	Maximum amount produced	Units
Drums	Transported via conveyor	300,000	drums/yr	300	drums/hr

12. Process fuel usage: Natural Gas

Type of fuel	Maximum heat input to process million BTU/hr.	Average usage	Units	Maximum usage	Units
Natural Gas	2.6	10.82	mmft <sup>3</sup> /yr	22.78	mmft <sup>3</sup> /yr

13. Describe any fugitive emissions associated with this process, such as outdoor storage piles, unpaved roads, open conveyors, etc.: N/A

Attached?  
N/A

\*\*\*\*\* For this emissions unit, identify the method(s) of compliance demonstration by completing Form 4530-118, \*\*\*\*\*  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE. Attach Form 4530-118  
and its attachment(s) to this form. This is not a requirement of non-Part 70 sources.

\*\*\*\*\* Please complete the Air Pollution Control Permit Application Forms 4530-126 and 4530-128 for this Unit. \*\*\*\*\*

State of Wisconsin  
Department of Natural Resources

CONTROL EQUIPMENT MISCELLANEOUS  
AIR POLLUTION CONTROL PERMIT APPLICATION

Form 4530-110 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S12C	4. Unit identification number: P32C
5. Control device number: C32C	
6. Manufacturer and model number: Chemco Mfg. Co., Chemco Duo-Pads (Dry Filter) or similar	
7. Date of installation: Installed at Norwich Ave. Location: In 2005 after fire Move to Pennsylvania Ave. Location: 2015	
8. Describe in detail the device in use. Attach a diagram of the system. The control systems consist of standard dry filters	

Attached? Yes

9. List the pollutants to be controlled by this equipment and the expected control efficiency for each pollutant on the table below.

☐ Documentation is attached?

Pollutant	Inlet pollutant concentration		Hood capture efficiency (%)	Outlet pollutant concentration		Efficiency (%)
	gr/acf	ppmv		gr/acf	ppmv	
Particulate Matter	N/A	N/A	100%	N/A	N/A	98%

10. Discuss how the collected material will be handled for reuse or disposal.

The paint filters are incinerated, and the water from the wash filters are sent to wastewater

11. Prepare a malfunction prevention and abatement plan (if required under s. NR 439.11) for this pollution control system. Please include the following:

- Identification of the individuals(s), by title, responsible for inspecting, maintaining and repairing this device.
- Operation variables such as temperature that will be monitored in order to detect a malfunction or breakthrough, the correct operating range of these variables, and a detailed description of monitoring or surveillance procedures that will be used to show compliance.
- What type of monitoring equipment will be provided (temperature sensors, pressure sensors, CEMs).
- An inspection schedule and items or conditions that will be inspected.
- A listing of materials and spare parts that will be maintained in inventory.
- Is this plan available for review? Yes, see Attachment with December 2008 application

State of Wisconsin  
Department of Natural Resources

CONTROL EQUIPMENT-WET COLLECTION SYSTEMS  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-116 11-93

Information attached? Y (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

Section A

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number S98	4. Unit identification number P11, P12, P13, P14, P15, P16, P41, P42, P72, P73, P74, P80A, P80C, P95
5. Control device number C70	

6. Manufacturer and model number IES 45,000 CFM Caustic Wash Scrubber

7. Date of installation 2015

8. Describe in detail the control system. Attach a blueprint or diagram of the system. Attached? Yes  
The pollutant (NaOH) is ducted to the scrubber where it is absorbed into the liquid stream. The pH is maintained between 5 and 9 by adding either NaOH or HCl as needed.

9. List the pollutants to be controlled by this equipment and the expected control efficiency for each pollutant on the table below.

☐ Documentation is attached

Pollutant	Inlet pollutant concentration		Outlet pollutant concentration		Efficiency (%)
	gr/acf	ppmv	gr/acf	ppmv	
NaOH	N/A	N/A	N/A	N/A	0 % (95% is true efficiency, but due to not wanting permit constraints, MASD is having the scrubber permitted at 0%)

10. Discuss how the collected material will be handled for reuse or disposal.

The collected material is disposed of as wastewater after being neutralized to a pH of between 5 and 9.

11. Prepare a malfunction prevention and abatement plan (if required under s. NR 439.11) for this pollution control system. Please include the following:

- Identification of the individuals(s), by title, responsible for inspecting, maintaining and repairing this device.
- Operation variables that will be monitored in order to detect a malfunction or breakthrough, the correct operating range of these variables, and a detailed description of monitoring or surveillance procedures that will be used to show compliance.
- An inspection schedule and items or conditions that will be inspected.
- A listing of materials and spare parts that will be maintained in inventory.
- Is this plan available for review? Yes

Section B

The following questions must be answered by sources installing new equipment or existing Units which cannot document control efficiency of this device by other means.

12. Liquid flow rate (gal/min): 124.94 lb/hr	13. Pressure drop across the scrubber and demister (inches of H <sub>2</sub> O): 2 – 10 inches H <sub>2</sub> O
14. Inlet gas flow rate (ACFM): 45,000	15. Inlet gas temperature (EF): 70
16. Scrubbing medium (water, sodium hydroxide slurry, etc.): Water	17. Liquid inlet pressure (psi): 80

State of Wisconsin  
Department of Natural Resources

CONTROL EQUIPMENT-WET COLLECTION SYSTEMS  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-116 11-93

Information attached? Y (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

Section A

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number S97	4. Unit identification number P75
5. Control device number C70	
6. Manufacturer and model number IES 4,000 CFM Acid Wash Scrubber	
7. Date of installation 2015	
8. Describe in detail the control system. Attach a blueprint or diagram of the system. Attached? <u>Yes</u> The pollutant (HCl) is ducted to the scrubber where it is absorbed into the liquid stream. The pH is maintained between 5 and 9 by adding either NaOH or HCl as needed.	

9. List the pollutants to be controlled by this equipment and the expected control efficiency for each pollutant on the table below.

☐ Documentation is attached

Pollutant	Inlet pollutant concentration		Outlet pollutant concentration		Efficiency (%)
	gr/acf	ppmv	gr/acf	ppmv	
HCl	N/A	N/A	N/A	N/A	0 % (95% is true efficiency, but due to not wanting permit constraints, MASD is having the scrubber permitted at 0%)

10. Discuss how the collected material will be handled for reuse or disposal.  
The collected material is disposed of as wastewater after being neutralized to a pH of between 5 and 9.

11. Prepare a malfunction prevention and abatement plan (if required under s. NR 439.11) for this pollution control system. Please include the following:
- Identification of the individuals(s), by title, responsible for inspecting, maintaining and repairing this device.
  - Operation variables that will be monitored in order to detect a malfunction or breakthrough, the correct operating range of these variables, and a detailed description of monitoring or surveillance procedures that will be used to show compliance.
  - An inspection schedule and items or conditions that will be inspected.
  - A listing of materials and spare parts that will be maintained in inventory.
  - Is this plan available for review? Yes

Section B

The following questions must be answered by sources installing new equipment or existing Units which cannot document control efficiency of this device by other means.

12. Liquid flow rate (gal/min): 11.11 lb/hr	13. Pressure drop across the scrubber and demister (inches of H <sub>2</sub> O): 2 – 10 inches H <sub>2</sub> O
14. Inlet gas flow rate (ACFM): 4,000	15. Inlet gas temperature (EF): 70
16. Scrubbing medium (water, sodium hydroxide slurry, etc.): Water	17. Liquid inlet pressure (psi): 80



State of Wisconsin  
Department of Natural Resources

COMPLIANCE CERTIFICATION - MONITORING AND REPORTING  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE  
Form 4530-118 11-93 Information attached? N (y/n)

All applicants except non-Part 70 sources are required to certify compliance with all applicable air pollution permit requirements by including a statement within the permit application of the methods used for determining compliance (please see sec. NR 407.05(4)(i), Wis. Adm. Code.) This statement must include a description of the monitoring, recordkeeping, and reporting requirements and test methods. In addition, the application must include a schedule for compliance certification submittals during the permit term. These submittals must be no less frequent than annually, and may need to be more frequent if specified by the underlying applicable requirement or by the Department.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S92, S93, S94, S95, S96, S62, S53, S12B	4. Unit identification number: P12, P13, P14, P15, P41, P42C, P50C, P32B

5. This Unit will use the following method(s) for determining compliance with the requirements of the permit (check all that apply and attach the appropriate form(s) to this form).

- ☐ Continuous Emission Monitoring (CEM) - Form 4530-119  
Pollutant(s):
- ☐ Periodic Emission Monitoring Using Portable Monitors - Form 4530-120  
Pollutant(s):
- ☐ Monitoring Control System Parameters or Operating Parameters of a Process - Form 4530-121  
Pollutant(s):
- ☐ Monitoring Maintenance Procedures - Form 4530-122  
Pollutant(s):
- ☐ Stack Testing - Form 4530-123  
Pollutant(s):
- ☐ Fuel Sampling and Analysis (FSA) - Form 4530-124  
Pollutant(s):
- ☒ Recordkeeping - Form 4530-125  
Pollutant(s): NOx, SO2, CO, PM, VOC
- ☐ Other (please describe) - Form 4530-135  
Pollutant(s):

6. Compliance certification reports will be submitted to the Department according to the following schedule:  
Start date: Following the end of the calendar year after issuance of this permit and every 12 months thereafter.

Compliance monitoring reports will be submitted to the Department according to the following schedule:  
Start date: Following the end of the first half of the calendar year after issuance of this permit and every 6 months thereafter.



State of Wisconsin  
Department of Natural Resources

COMPLIANCE CERTIFICATION - MONITORING AND REPORTING  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE  
Form 4530-118 11-93

Information attached? N(y/n)

All applicants except non-Part 70 sources are required to certify compliance with all applicable air pollution permit requirements by including a statement within the permit application of the methods used for determining compliance (please see sec. NR 407.05(4)(i), Wis. Adm. Code.) This statement must include a description of the monitoring, recordkeeping, and reporting requirements and test methods. In addition, the application must include a schedule for compliance certification submittals during the permit term. These submittals must be no less frequent than annually, and may need to be more frequent if specified by the underlying applicable requirement or by the Department.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number S98	4. Unit identification number C10 (P11, P12, P13, P14, P15, P16, P41, P42, P72, P73, P74, P80A, P80C, P95)

5. This Unit will use the following method(s) for determining compliance with the requirements of the permit (check all that apply and attach the appropriate form(s) to this form).

- ☐ Continuous Emission Monitoring (CEM) - Form 4530-119  
Pollutant(s):
- ☐ Periodic Emission Monitoring Using Portable Monitors - Form 4530-120  
Pollutant(s):
- ☒ Monitoring Control System Parameters or Operating Parameters of a Process - Form 4530-121  
Pollutant(s): NaOH
- ☐ Monitoring Maintenance Procedures - Form 4530-122  
Pollutant(s):
- ☐ Stack Testing - Form 4530-123  
Pollutant(s):
- ☐ Fuel Sampling and Analysis (FSA) - Form 4530-124  
Pollutant(s):
- ☒ Recordkeeping - Form 4530-125  
Pollutant(s): NaOH
- ☐ Other (please describe) - Form 4530-135  
Pollutant(s):

6. Compliance certification reports will be submitted to the Department according to the following schedule:  
Start date: Following the end of the calendar year after issuance of this permit and every 12 months thereafter.

Compliance monitoring reports will be submitted to the Department according to the following schedule:  
Start date: Following the end of the first half of the calendar year after issuance of this permit and every 6 months thereafter.

State of Wisconsin  
Department of Natural Resources

COMPLIANCE CERTIFICATION - MONITORING AND REPORTING  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE  
Form 4530-118 11-93

Information attached? N(y/n)

All applicants except non-Part 70 sources are required to certify compliance with all applicable air pollution permit requirements by including a statement within the permit application of the methods used for determining compliance (please see sec. NR 407.05(4)(i), Wis. Adm. Code.) This statement must include a description of the monitoring, recordkeeping, and reporting requirements and test methods. In addition, the application must include a schedule for compliance certification submittals during the permit term. These submittals must be no less frequent than annually, and may need to be more frequent if specified by the underlying applicable requirement or by the Department.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number S97	4. Unit identification number C70 (P75)

5. This Unit will use the following method(s) for determining compliance with the requirements of the permit (check all that apply and attach the appropriate form(s) to this form).

- ☐ Continuous Emission Monitoring (CEM) - Form 4530-119  
Pollutant(s):
- ☐ Periodic Emission Monitoring Using Portable Monitors - Form 4530-120  
Pollutant(s):
- ☒ Monitoring Control System Parameters or Operating Parameters of a Process - Form 4530-121  
Pollutant(s): HCl
- ☐ Monitoring Maintenance Procedures - Form 4530-122  
Pollutant(s):
- ☐ Stack Testing - Form 4530-123  
Pollutant(s):
- ☐ Fuel Sampling and Analysis (FSA) - Form 4530-124  
Pollutant(s):
- ☒ Recordkeeping - Form 4530-125  
Pollutant(s): HCl
- ☐ Other (please describe) - Form 4530-135  
Pollutant(s):

6. Compliance certification reports will be submitted to the Department according to the following schedule:  
Start date: Following the end of the calendar year after issuance of this permit and every 12 months thereafter.

Compliance monitoring reports will be submitted to the Department according to the following schedule:  
Start date: Following the end of the first half of the calendar year after issuance of this permit and every 6 months thereafter.

State of Wisconsin  
Department of Natural Resources

COMPLIANCE CERTIFICATION - MONITORING AND REPORTING  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE  
Form 4530-118 11-93

Information attached? N (y/n)

All applicants except non-Part 70 sources are required to certify compliance with all applicable air pollution permit requirements by including a statement within the permit application of the methods used for determining compliance (please see sec. NR 407.05(4)(i), Wis. Adm. Code.) This statement must include a description of the monitoring, recordkeeping, and reporting requirements and test methods. In addition, the application must include a schedule for compliance certification submittals during the permit term. These submittals must be no less frequent than annually, and may need to be more frequent if specified by the underlying applicable requirement or by the Department.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: <u>CLCM St. Francis</u>	2. Facility identification number: <u>341158070</u>
3. Stack identification number: <u>S12C</u>	4. Unit identification number: <u>C32C (P32C)</u>

5. This Unit will use the following method(s) for determining compliance with the requirements of the permit (check all that apply and attach the appropriate form(s) to this form).

- ☐ Continuous Emission Monitoring (CEM) - Form 4530-119  
Pollutant(s):
- ☐ Periodic Emission Monitoring Using Portable Monitors - Form 4530-120  
Pollutant(s):
- ☒ Monitoring Control System Parameters or Operating Parameters of a Process - Form 4530-121  
Pollutant(s): PM
- ☐ Monitoring Maintenance Procedures - Form 4530-122  
Pollutant(s):
- ☐ Stack Testing - Form 4530-123  
Pollutant(s):
- ☐ Fuel Sampling and Analysis (FSA) - Form 4530-124  
Pollutant(s):
- ☒ Recordkeeping - Form 4530-125  
Pollutant(s): PM, VOC, HAPs
- ☐ Other (please describe) - Form 4530-135  
Pollutant(s):

6. Compliance certification reports will be submitted to the Department according to the following schedule:  
Start date: Following the end of the calendar year after issuance of this permit and every 12 months thereafter.

Compliance monitoring reports will be submitted to the Department according to the following schedule:  
Start date: Following the end of the first half of the calendar year after issuance of this permit and every 6 months thereafter.

State of Wisconsin  
Department of Natural Resources

COMPLIANCE CERTIFICATION - MONITORING AND REPORTING  
DESCRIPTION OF METHODS USED FOR DETERMINING COMPLIANCE  
Form 4530-118 11-93

Information attached? N (y/n)

All applicants except non-Part 70 sources are required to certify compliance with all applicable air pollution permit requirements by including a statement within the permit application of the methods used for determining compliance (please see sec. NR 407.05(4)(i), Wis. Adm. Code.) This statement must include a description of the monitoring, recordkeeping, and reporting requirements and test methods. In addition, the application must include a schedule for compliance certification submittals during the permit term. These submittals must be no less frequent than annually, and may need to be more frequent if specified by the underlying applicable requirement or by the Department.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S44, S45, S91	4. Unit identification number: P44, P45, P71

5. This Unit will use the following method(s) for determining compliance with the requirements of the permit (check all that apply and attach the appropriate form(s) to this form).

- ☐ Continuous Emission Monitoring (CEM) - Form 4530-119  
Pollutant(s):
- ☐ Periodic Emission Monitoring Using Portable Monitors - Form 4530-120  
Pollutant(s):
- ☐ Monitoring Control System Parameters or Operating Parameters of a Process - Form 4530-121  
Pollutant(s):
- ☐ Monitoring Maintenance Procedures - Form 4530-122  
Pollutant(s):
- ☐ Stack Testing - Form 4530-123  
Pollutant(s):
- ☐ Fuel Sampling and Analysis (FSA) - Form 4530-124  
Pollutant(s):
- ☒ Recordkeeping - Form 4530-125  
Pollutant(s): VOC, HAPs
- ☐ Other (please describe) - Form 4530-135  
Pollutant(s):

6. Compliance certification reports will be submitted to the Department according to the following schedule:  
Start date: Following the end of the calendar year after issuance of this permit and every 12 months thereafter.

Compliance monitoring reports will be submitted to the Department according to the following schedule:  
Start date: Following the end of the first half of the calendar year after issuance of this permit and every 6 months thereafter.

State of Wisconsin  
Department of Natural Resources

COMPLIANCE DEMONSTRATION BY MONITORING CONTROL SYSTEM  
PARAMETERS OR OPERATING PARAMETERS OF A PROCESS  
AIR POLLUTION CONTROL PERMIT APPLICATION

Form 4530-121 11-93

Information attached? N (y/n)

The monitoring of a control system parameter or a process may be acceptable as a compliance demonstration method provided that a correlation between the parameter value and the emission rate of a particular pollutant is established in the form of a curve of emission rate versus parameter values. Ideally three sets of stack test data, that bracket the emission limit if possible, could be used to define the emission curve. This correlation shall constitute the certification of the system. It should be attached for Department approval. If it is not attached, please submit it within 60 days of the startup of the system.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S12C	4. Unit identification number: C32C (P32C)
5. Pollutant(s) being monitored: PM	
6. Name of manufacturer: Dwyer	7. Model number: Magnahelic
8. Is this an existing system? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	9. Installation date: 1995/2015

10. Method of monitoring description:

The pressure drop is recorded once every day or 24 hours of operation.

11. Backup system: None

12. Indicate by checking:

The monitoring system shall be subject to appropriate performance specifications, calibration requirements and quality assurance procedures. ☐ A quality assurance/quality control plan for the monitoring system is attached for Department approval. ☐ If the plan is not attached, please submit it within 60 days of the start-up of the monitoring program. ☐ The plan was submitted to the Department \_\_\_\_\_. ☒ An updated plan will be submitted to Mike Griffin of the DNR by November 16, 2015.

13. The applicant shall propose an appropriate averaging period, (i.e., a particular number of continuous hours) for the purpose of defining excess emissions. The Department may approve the proposed averaging period, or other period which the Department determines to be appropriate. Provide the proposed averaging period(s) below.

Parameter	Averaging Period
Pressure Drop Across the Dry Filter	Daily

State of Wisconsin  
Department of Natural Resources

COMPLIANCE DEMONSTRATION BY MONITORING CONTROL SYSTEM  
PARAMETERS OR OPERATING PARAMETERS OF A PROCESS  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-121 11-93

Information attached? N (y/n)

The monitoring of a control system parameter or a process may be acceptable as a compliance demonstration method provided that a correlation between the parameter value and the emission rate of a particular pollutant is established in the form of a curve of emission rate versus parameter values. Ideally three sets of stack test data, that bracket the emission limit if possible, could be used to define the emission curve. This correlation shall constitute the certification of the system. It should be attached for Department approval. If it is not attached, please submit it within 60 days of the startup of the system.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number S98	4. Unit identification number C10 (P11, P12, P13, P14, P15, P16, P41, P42, P72, P73, P74, P80A, P80C, P95)
5. Pollutant(s) being monitored: NaOH	
6. Name of manufacturer: IES	7. Model number:
8. Is this an existing system? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9. Installation date: 2015
10. Method of monitoring description: When in operation, the pressure drop across the scrubber and the liquor flow rate water will be recorded once per day of operation.	
11. Backup system: None	
12. Indicate by checking:	

The monitoring system shall be subject to appropriate performance specifications, calibration requirements and quality assurance procedures. ☐ A quality assurance/quality control plan for the monitoring system is attached for Department approval. ☐ If the plan is not attached, please submit it within 60 days of the start-up of the monitoring program. ☐ The plan was submitted to the Department \_\_\_\_\_. ☒ An updated plan will be submitted to Mike Griffin of the DNR by November 16, 2015.

13. The applicant shall propose an appropriate averaging period, (i.e., a particular number of continuous hours) for the purpose of defining excess emissions. The Department may approve the proposed averaging period, or other period which the Department determines to be appropriate. Provide the proposed averaging period(s) below.

Parameter	Averaging Period
Differential Across the Scrubber	Daily
Water (system) Flow	Daily

State of Wisconsin  
Department of Natural Resources

COMPLIANCE DEMONSTRATION BY MONITORING CONTROL SYSTEM  
PARAMETERS OR OPERATING PARAMETERS OF A PROCESS  
AIR POLLUTION CONTROL PERMIT APPLICATION

Form 4530-121 11-93

Information attached? N (y/n)

The monitoring of a control system parameter or a process may be acceptable as a compliance demonstration method provided that a correlation between the parameter value and the emission rate of a particular pollutant is established in the form of a curve of emission rate versus parameter values. Ideally three sets of stack test data, that bracket the emission limit if possible, could be used to define the emission curve. This correlation shall constitute the certification of the system. It should be attached for Department approval. If it is not attached, please submit it within 60 days of the startup of the system.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number S97	4. Unit identification number C70 (P75)
5. Pollutant(s) being monitored: HCl	
6. Name of manufacturer: IES	7. Model number:
8. Is this an existing system? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9. Installation date: 2015
10. Method of monitoring description: When in operation, the pressure drop across the scrubber and the liquor flow rate water will be recorded once per day of operation.	
11. Backup system: None	
12. Indicate by checking:	

The monitoring system shall be subject to appropriate performance specifications, calibration requirements and quality assurance procedures. ☐ A quality assurance/quality control plan for the monitoring system is attached for Department approval. ☐ If the plan is not attached, please submit it within 60 days of the start-up of the monitoring program. ☐ The plan was submitted to the Department \_\_\_\_\_. ☒ An updated plan will be submitted to Mike Griffin of the DNR by November 16, 2015.

13. The applicant shall propose an appropriate averaging period, (i.e., a particular number of continuous hours) for the purpose of defining excess emissions. The Department may approve the proposed averaging period, or other period which the Department determines to be appropriate. Provide the proposed averaging period(s) below.

Parameter	Averaging Period
Differential Across the Scrubber	Daily
Water (system) Flow	Daily

State of Wisconsin  
Department of Natural Resources

COMPLIANCE DEMONSTRATION BY RECORDKEEPING  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-125 11-93

Information attached? N (y/n)

Recordkeeping may be acceptable as a compliance demonstration method provided that a correlation between the parameter value recorded and the emission rate of a particular pollutant is established in the form of a curve or chart of emission rate versus parameter values. This correlation may constitute the certification of the system. It should be attached for Department approval. If it is not attached, please submit it within 60 days of the startup of the system.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S92, S93, S94, S95, S96, S62, S53 S12B	4. Unit identification number: P12, P13, P14, P15, P41, P42C, P50C, P32B
5. Pollutant(s) being monitored: NOx, SO2, CO, PM, VOC	6. Material or parameter being monitored and recorded: Natural Gas Usage
7. Method of monitoring and recording: The facility wide natural gas usage will be recorded monthly.	
8. List any EPA methods used: None	
9. Is this an existing method of demonstrating compliance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10. Installation date: various – see above forms
11. Backup system: Purchasing Records	
12. Compliance shall be demonstrated: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Batch (not to exceed monthly)	
13. Indicate by checking:  The monitoring system shall be subject to appropriate performance specifications, calibration requirements and quality assurance procedures. <input type="checkbox"/> A quality assurance/quality control plan for the monitoring system is attached for Department approval. <input type="checkbox"/> If the plan is not attached, please submit it within 60 days of the start-up of the monitoring program. <input checked="" type="checkbox"/> The plan was submitted to the Department <u>with the original application for the site formerly known as Kitizinger (FID 241063570).</u>	

\*\*\*\*\* The compliance records shall be available for Department inspection. The format for the compliance certification report and the excess emission report shall be approved by the Department. A proposed format for the compliance certification report and excess emission report shall be submitted at the same time as the application. \*\*\*\*\*

\*\*\*\*\* The source shall record any malfunction that causes or may cause an emission limit to be exceeded. \*\*\*\*\*  
Malfunctions shall be reported to the Department the next business day. Hazardous air spills shall be reported to the Department immediately.

State of Wisconsin  
Department of Natural Resources

COMPLIANCE DEMONSTRATION BY RECORDKEEPING  
AIR POLLUTION CONTROL PERMIT APPLICATION

Form 4530-125 11-93

Information attached? N (y/n)

Recordkeeping may be acceptable as a compliance demonstration method provided that a correlation between the parameter value recorded and the emission rate of a particular pollutant is established in the form of a curve or chart of emission rate versus parameter values. This correlation may constitute the certification of the system. It should be attached for Department approval. If it is not attached, please submit it within 60 days of the startup of the system.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S12C	4. Unit identification number: C32C (P32C)
5. Pollutant(s) being monitored: PM, VOCs, and HAPs	6. Material or parameter being monitored and recorded: Coating Throughput

7. Method of monitoring and recording:

The facility will record the coating throughput monthly. The coating compositions will be taken from the Material Safety Data Sheets. Coating throughput will be the total usage for coating processes.

8. List any EPA methods used: None

9. Is this an existing method of demonstrating compliance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10. Installation date: 1995/2015
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11. Backup system: Purchasing Records

12. Compliance shall be demonstrated: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Batch (not to exceed monthly)
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13. Indicate by checking:

The monitoring system shall be subject to appropriate performance specifications, calibration requirements and quality assurance procedures. ☐ A quality assurance/quality control plan for the monitoring system is attached for Department approval. ☐ If the plan is not attached, please submit it within 60 days of the start-up of the monitoring program. ☐ The plan was submitted to the Department \_\_\_\_\_. ☒ An updated plan will be submitted to Mike Griffin of the DNR by November 16, 2015.

\*\*\*\*\* The compliance records shall be available for Department inspection. The format for the compliance certification report and the excess emission report shall be approved by the Department. A proposed format for the compliance certification report and excess emission report shall be submitted at the same time as the application. \*\*\*\*\*

\*\*\*\*\* The source shall record any malfunction that causes or may cause an emission limit to be exceeded. \*\*\*\*\*  
Malfunctions shall be reported to the Department the next business day. Hazardous air spills shall be reported to the Department immediately.

State of Wisconsin  
Department of Natural Resources

COMPLIANCE DEMONSTRATION BY RECORDKEEPING  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-125 11-93

Information attached? N (y/n)

Recordkeeping may be acceptable as a compliance demonstration method provided that a correlation between the parameter value recorded and the emission rate of a particular pollutant is established in the form of a curve or chart of emission rate versus parameter values. This correlation may constitute the certification of the system. It should be attached for Department approval. If it is not attached, please submit it within 60 days of the startup of the system.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: S44, S45, S91	4. Unit identification number: P44, P45, P71
5. Pollutant(s) being monitored: VOC, HAPs	6. Material or parameter being monitored and recorded: HAP and VOC Usage

7. Method of monitoring and recording:

The facility will record the amount of solvents used monthly.

8. List any EPA methods used: None

9. Is this an existing method of demonstrating compliance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10. Installation date: 1995/2015
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11. Backup system: Purchasing Records

12. Compliance shall be demonstrated: ☐ Daily ☐ Weekly ☒ Monthly ☐ Batch (not to exceed monthly)

13. Indicate by checking:

The monitoring system shall be subject to appropriate performance specifications, calibration requirements and quality assurance procedures. ☐ A quality assurance/quality control plan for the monitoring system is attached for Department approval. ☐ If the plan is not attached, please submit it within 60 days of the start-up of the monitoring program. ☐ The plan was submitted to the Department \_\_\_\_\_. ☒ An updated plan will be submitted to Mike Griffin of the DNR by November 16, 2015.

\*\*\*\*\* The compliance records shall be available for Department inspection. The format for the compliance certification report and the excess emission report shall be approved by the Department. A proposed format for the compliance certification report and excess emission report shall be submitted at the same time as the application. \*\*\*\*\*

\*\*\*\*\* The source shall record any malfunction that causes or may cause an emission limit to be exceeded. \*\*\*\*\*  
Malfunctions shall be reported to the Department the next business day. Hazardous air spills shall be reported to the Department immediately.

State of Wisconsin  
Department of Natural Resources

COMPLIANCE DEMONSTRATION BY RECORDKEEPING  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-125 11-93

Information attached? N (y/n)

Recordkeeping may be acceptable as a compliance demonstration method provided that a correlation between the parameter value recorded and the emission rate of a particular pollutant is established in the form of a curve or chart of emission rate versus parameter values. This correlation may constitute the certification of the system. It should be attached for Department approval. If it is not attached, please submit it within 60 days of the startup of the system.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number S98	4. Unit identification number C10 (P11, P12, P13, P14, P15, P16, P41, P42, P72, P73, P74, P80A, P80C, P95)
5. Pollutant(s) being monitored: NaOH	6. Material or parameter being monitored and recorded: NaOH Usage

7. Method of monitoring and recording:  
The facility will record the amount of NaOH used monthly.

8. List any EPA methods used: None

9. Is this an existing method of demonstrating compliance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	10. Installation date: 2015
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11. Backup system: Purchasing Records

12. Compliance shall be demonstrated: Daily Weekly <input checked="" type="checkbox"/> Monthly Batch (not to exceed monthly)
--

13. Indicate by checking:

The monitoring system shall be subject to appropriate performance specifications, calibration requirements and quality assurance procedures. ☐ A quality assurance/quality control plan for the monitoring system is attached for Department approval. ☐ If the plan is not attached, please submit it within 60 days of the start-up of the monitoring program. ☐ The plan was submitted to the Department \_\_\_\_\_. ☒ An updated plan will be submitted to Mike Griffin of the DNR by November 16, 2015.

\*\*\*\*\* The compliance records shall be available for Department inspection. The format for the compliance certification report and the excess emission report shall be approved by the Department. A proposed format for the compliance certification report and excess emission report shall be submitted at the same time as the application. \*\*\*\*\*

\*\*\*\*\* The source shall record any malfunction that causes or may cause an emission limit to be exceeded. \*\*\*\*\*  
Malfunctions shall be reported to the Department the next business day. Hazardous air spills shall be reported to the Department immediately.

State of Wisconsin  
Department of Natural Resources

COMPLIANCE DEMONSTRATION BY RECORDKEEPING  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-125 11-93

Information attached? N (y/n)

Recordkeeping may be acceptable as a compliance demonstration method provided that a correlation between the parameter value recorded and the emission rate of a particular pollutant is established in the form of a curve or chart of emission rate versus parameter values. This correlation may constitute the certification of the system. It should be attached for Department approval. If it is not attached, please submit it within 60 days of the startup of the system.

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number S97	4. Unit identification number C70 (P75)
5. Pollutant(s) being monitored: HCl	6. Material or parameter being monitored and recorded: HCl Usage

7. Method of monitoring and recording:  
The facility will record the amount of HCl used monthly.

8. List any EPA methods used: None

9. Is this an existing method of demonstrating compliance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	10. Installation date: 2015
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11. Backup system: Purchasing Records

12. Compliance shall be demonstrated: Daily Weekly ☒ Monthly Batch (not to exceed monthly)

13. Indicate by checking:

The monitoring system shall be subject to appropriate performance specifications, calibration requirements and quality assurance procedures. ☐ A quality assurance/quality control plan for the monitoring system is attached for Department approval. ☐ If the plan is not attached, please submit it within 60 days of the start-up of the monitoring program. ☐ The plan was submitted to the Department \_\_\_\_\_. ☒ An updated plan will be submitted to Mike Griffin of the DNR by November 16, 2015.

\*\*\*\*\* The compliance records shall be available for Department inspection. The format for the compliance certification report and the excess emission report shall be approved by the Department. A proposed format for the compliance certification report and excess emission report shall be submitted at the same time as the application. \*\*\*\*\*

\*\*\*\*\* The source shall record any malfunction that causes or may cause an emission limit to be exceeded. \*\*\*\*\*  
Malfunctions shall be reported to the Department the next business day. Hazardous air spills shall be reported to the Department immediately.





Attachment to Forms 4530-126 and -127  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015

Pollutant CAS	Actual emissions		Maximum theoretical emissions		Potential to emit	
		Units		Units		
<i>S98/C10 (P11, P12, P13, P14, P15, P16, P41, P42, P72, P73, P74, P80A, P80C, P95, C70, Other Units)</i>						
Sodium Hydroxide (mist), 1310-73-2	0.02	ton/yr	0.62	lb/hr	1.28	ton/yr
<i>S91 (fugitive)/P71</i>						
Methylene Chloride, 75-09-2	4.39	ton/yr	25.77	lb/hr	7.22	ton/yr
Methanol, 67-56-1	0.62	ton/yr	3.64	lb/hr	1.02	ton/yr
Toluene, 108-88-3	0.31	ton/yr	1.82	lb/hr	0.51	ton/yr
<i>S97/C70 (P75)</i>						
Hydrochloric Acid (mist), 7647-01-0	0.002	ton/yr	0.05	lb/hr	0.10	ton/yr
<i>S12C/C23C (P32C)</i>						
Glycol Ethers, N/A	2.51	ton/yr	2.45	lb/hr	4.06	ton/yr
<i>All Other Stacks</i>						
None						
<i>Total</i>						
Glycol Ethers, N/A	2.51	ton/yr	2.45	lb/hr	4.06	ton/yr
Methylene Chloride, 75-09-2	4.39	ton/yr	25.77	lb/hr	7.22	ton/yr
Methanol, 67-56-1	0.62	ton/yr	3.64	lb/hr	1.02	ton/yr
Toluene, 108-88-3	0.31	ton/yr	1.82	lb/hr	0.51	ton/yr
Sodium Hydroxide (mist), 1310-73-2	0.02	ton/yr	0.62	lb/hr	1.28	ton/yr
Hydrochloric Acid (mist), 7647-01-0	0.002	ton/yr	0.05	lb/hr	0.10	ton/yr

State of Wisconsin  
Department of Natural Resources

EMISSION UNIT SUMMARY  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-128 11-93 Information attached? Y (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: All	4. Unit identification number: All

5. Complete the following emissions summary for the following pollutants. Attach sample calculations and emission factor references. Attached? Yes

Air pollutant	Actual			Maximum theoretical emissions			Potential to emit	Maximum allowable		
		U	TPY		U	TPY			U	TPY
Particulates/PM10	See following sheet and Tables 1-16									
Sulfur dioxide										
Organic compounds										
Carbon monoxide										
Nitrogen oxides										

Units (U) should be entered as follows:

- 1 = lb/hr
- 2 = lb/mmBTU
- 3 = grains/dscf
- 4 = lb/ gallon
- 5 = ppmdv
- 6 = other (specify)
- 7 = other (specify)
- 8 = other (specify)

State of Wisconsin  
Department of Natural Resources

FACILITY EMISSIONS SUMMARY  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-129 11-93

Information attached? Y (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis

2. Facility identification number: 341158070

3. Complete the following emissions summary for the listed emissions at this facility.

Air pollutant	Actual	Maximum theoretical emissions	Potential to emit	Maximum allowable
	TPY	TPY	TPY	TPY
Particulates	See following sheet and Table 1			
Sulfur dioxide				
Organic compounds				
Carbon monoxide				
Nitrogen oxides				
PM-10				

Attachment to Forms 4530-128 and -129  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015

Pollutant CAS	Actual emissions		Maximum theoretical emissions		Potential to emit		Maximum Allowable	
	Units	TPY	Units	TPY			Units	TPY
<i>S98/C10 (P11, P12, P13, P14, P15, P16, P41, P42, P72, P73, P74, P80A, P80C, P95, C70, Other Units)</i>								
None								
<i>All Combustion: S92/P12, S93/P13, S94/P14, S95/P15, S96/P41, S62/P42C, S33/P30C, S12B/P32B</i>								
Volatiles Organic Compounds (VOC)	0.04	lb/hr (1)	0.08	0.36	0.36	ton/yr	0.08	lb/hr (1)
Carbon Monoxide (CO)	0.60	lb/hr (1)	1.27	5.57	5.57	ton/yr	1.27	lb/hr (1)
Nitrogen Oxides (NO <sub>x</sub> )	0.72	lb/hr (1)	1.52	6.64	6.64	ton/yr	1.52	lb/hr (1)
Particulates (PM)	0.05	lb/hr (1)	0.12	0.50	0.50	ton/yr	0.12	lb/hr (1)
Particulates-10 (PM-10)	0.05	lb/hr (1)	0.12	0.50	0.50	ton/yr	0.12	lb/hr (1)
Sulfur Dioxide (SO <sub>2</sub> )	0.004	lb/hr (1)	0.01	0.04	0.04	ton/yr	0.01	lb/hr (1)
<i>S45 (Agiline)/P45</i>								
Volatiles Organic Compounds (VOC)	0.96	lb/hr (1)	1.58	6.90	1.64	ton/yr	1.58	lb/hr (1)
<i>S91 (Agiline)/P71</i>								
Volatiles Organic Compounds (VOC)	2.77	lb/hr (1)	4.56	19.97	1.28	ton/yr	4.56	lb/hr (1)
<i>S97/C70 (P73)</i>								
None								
<i>S12C/C3C (P32C)</i>								
Volatiles Organic Compounds (VOC)	25.16	lb/hr (1)	41.64	177.83	67.20	ton/yr	40.60	lb/hr (1)
Particulates (PM)	0.18	lb/hr (1)	0.29	47.42	0.47	ton/yr	0.29	lb/hr (1)
<i>Total</i>								
Volatiles Organic Compounds (VOC)	28.93	lb/hr (1)	43.58	205.06	70.48	ton/yr	46.82	lb/hr (1)
Carbon Monoxide (CO)	0.60	lb/hr (1)	2.65	5.57	5.57	ton/yr	1.27	lb/hr (1)
Nitrogen Oxides (NO <sub>x</sub> )	0.72	lb/hr (1)	3.15	6.64	6.64	ton/yr	1.52	lb/hr (1)
Particulates (PM)	0.23	lb/hr (1)	0.53	47.93	0.98	ton/yr	0.40	lb/hr (1)
Particulates-10 (PM-10)	0.05	lb/hr (1)	0.24	0.50	0.50	ton/yr	0.12	lb/hr (1)
Sulfur Dioxide (SO <sub>2</sub> )	0.004	lb/hr (1)	0.02	0.04	0.04	ton/yr	0.01	lb/hr (1)

State of Wisconsin  
Department of Natural Resources

CURRENT EMISSIONS REQUIREMENTS AND STATUS OF UNIT  
AIR POLLUTION CONTROL PERMIT APPLICATION

Form 4530-130 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis		2. Facility identification number: 341158070		
3. Stack identification number: S92, S93, S94, S95, S96, S62, S53 S12B		4. Unit identification number: P12, P13, P14, P15, P41, P42C, P50C, P32B		
5. Pollutant	6. Wis. Adm. Code Wis. Stats., 40 CFR	7. State Only	8. Limitation	9. Compliance Status (in or out)
Particulate Matter	NR 415.06(3)(a) Wis. Adm. Code		General Limitations	In
Carbon Monoxide	NR 426.03 Wis. Adm. Code		General Limitations	In
Nitrogen Oxides	NR 428.03 Wis. Adm. Code		General Limitations	In
Sulfur Dioxide	NR 417.025 Wis. Adm. Code		General Limitations	In
Volatile Organic Compounds	NR 419.03 Wis. Adm. Code		General Limitations	In
Visible Emissions	NR 431.03 Wis. Adm. Code		20 Percent Opacity	In
Hazardous Air Pollutants	NR 445.03 Wis. Adm. Code	Yes	General Limitations	In
10. Other requirements (e.g., malfunction reporting, special operating conditions from an existing permit, etc.)			State Only	Compliance Status (in or out)
None				N/A

State of Wisconsin  
Department of Natural Resources

CURRENT EMISSIONS REQUIREMENTS AND STATUS OF UNIT  
AIR POLLUTION CONTROL PERMIT APPLICATION

Form 4530-130 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis		2. Facility identification number: 341158070		
3. Stack identification number: S12C		4. Unit identification number: C32C (P32C)		
5. Pollutant	6. Wis. Adm. Code Wis. Stats., 40 CFR	7. State Only	8. Limitation	9. Compliance Status (in or out)
Particulate Matter	NR 415.06(3)(a) Wis. Adm Code		0.4 pounds particulate per 100 pounds stack gas	In
Carbon Monoxide	NR 426.03 Wis. Adm. Code		General Limitations	In
Nitrogen Oxides	NR 428.03 Wis. Adm. Code		General Limitations	In
Sulfur Dioxide	NR 417.025 Wis. Adm. Code		General Limitations	In
Volatile Organic Compounds	NR 419.03 Wis. Adm. Code		3.5 pounds VOC per gallon coating, less water	In
Visible Emissions	NR 431.03 Wis. Adm. Code		20 Percent Opacity	In
Hazardous Air Pollutants	NR 445.03 Wis. Adm. Code	Yes	General Limitations	In
10. Other requirements (e.g., malfunction reporting, special operating conditions from an existing permit, etc.)			State Only	Compliance Status (in or out)
None				N/A

State of Wisconsin  
Department of Natural Resources

CURRENT EMISSIONS REQUIREMENTS AND STATUS OF UNIT  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-130 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis		2. Facility identification number: 341158070		
3. Stack identification number S98 / S97		4. Unit identification number C10 (P11, P12, P13, P14, P15, P16, P41, P42, P72, P73, P74, P80A, P80C, P95) / C70 (P75)		
5. Pollutant	6. Wis. Adm. Code Wis. Stats., 40 CFR	7. State Only	8. Limitation	9. Compliance Status (in or out)
Particulate Matter	NR 415.06(3)(a) Wis. Adm Code		General Limitations	In
Carbon Monoxide	NR 426.03 Wis. Adm. Code		General Limitations	In
Nitrogen Oxides	NR 428.03 Wis. Adm. Code		General Limitations	In
Sulfur Dioxide	NR 417.025 Wis. Adm. Code		General Limitations	In
Visible Emissions	NR 431.03 Wis. Adm. Code		20 Percent Opacity	In
Hazardous Air Pollutants	NR 445.03 Wis. Adm. Code	Yes	General Limitations	In
Volatile Organic Compounds	NR 419.03 Wis. Adm. Code		General Limitations	In
10. Other requirements (e.g., malfunction reporting, special operating conditions from an existing permit, etc.)			State Only	Compliance Status (in or out)
None				N/A

State of Wisconsin  
Department of Natural Resources

CURRENT EMISSIONS REQUIREMENTS AND STATUS OF UNIT  
AIR POLLUTION CONTROL PERMIT APPLICATION

Form 4530-130 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis		2. Facility identification number: 341158070		
3. Stack identification number: S44, S45, S91		4. Unit identification number: P44, P45, P71		
5. Pollutant	6. Wis. Adm. Code Wis. Stats., 40 CFR	7. State Only	8. Limitation	9. Compliance Status (in or out)
Volatile Organic Compounds	NR 419.03 Wis. Adm. Code		85% Control or LACT	In
Visible Emissions	NR 431.03 Wis. Adm. Code		20 Percent Opacity	In
Hazardous Air Pollutants	NR 445.03 Wis. Adm. Code	Yes	General Limitations	In
10. Other requirements (e.g., malfunction reporting, special operating conditions from an existing permit, etc.)			State Only	Compliance Status (in or out)
None				N/A

State of Wisconsin  
Department of Natural Resources

EMISSION UNIT COMPLIANCE PLAN  
COMMITMENTS AND SCHEDULE  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-131 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. Stack identification number: All	4. Unit identification number: All

5. For Units that are presently in compliance with all applicable requirements, including any enhanced monitoring and compliance certification requirements under section 114(a)(3) of the Clean Air Act that apply, complete the following. These commitments are part of the application for Part 70 permits.

- ☒ We will continue to operate and maintain this Unit in compliance with all applicable requirements.
- ☒ Form 4530-130 includes new requirements that apply or will apply to this Unit during the term of the permit. We will meet such requirements on a timely basis.

6. For Units not presently fully in compliance, complete the following.

- ☐ This Unit is in compliance with all applicable requirements except for those indicated below. We will achieve compliance according to the following schedule:

Applicable Requirement	Corrective Actions	Deadline
1.		
2.		
3.		

Progress reports will be submitted:

Start date: \_\_\_\_\_ and every six (6) months thereafter

State of Wisconsin  
Department of Natural Resources

CURRENT EMISSIONS REQUIREMENTS AND STATUS OF FACILITY  
AIR POLLUTION CONTROL PERMIT APPLICATION

Form 4530-132 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis			2. Facility identification number: 341158070	
3. Pollutant	4. Wis. Adm. Code Wis. Stats., 40 CFR	5. State Only	6. Threshold Value	7. Compliance Status (in or out)
Carbon Monoxide	NR 426.03 Wis. Adm. Code		General Limitations	In
Nitrogen Oxides	NR 428.03 Wis. Adm. Code		General Limitations	In
Sulfur Dioxide	NR 417.025 Wis. Adm. Code		General Limitations	In
Volatile Organic Compounds	NR 419.03 Wis. Adm. Code		General Limitations	In
Visible Emissions	NR 431.03 Wis. Adm. Code		General Limitations	In
Hazardous Air Pollutants	NR 445.03 Wis. Adm. Code	Yes	General Limitations	In
Malodorous Emissions	NR 429.03 Wis. Adm. Code		General Limitations	In
Particulate Matter	NR 415.03 Wis. Adm. Code		General Limitations	In
All Pollutants	NR 445.05 Wis. Adm. Code	Yes	Diminimus	In

8. Is this facility subject to the provisions governing prevention of accidental releases of hazardous air contaminants contained in section 112(r)(7) of the Clean Air Act? ☐ Yes ☒ No

If you answered yes, please describe how you will achieve compliance with these provisions, including the requirement to formulate a plan for preventing accidental releases (sec. 112(r)(7)(B)(ii)):

9. Other requirements (e.g., malfunction reporting, special operating conditions from an existing permit, etc.)	State Only	Compliance Status (in or out)
None		

State of Wisconsin  
Department of Natural Resources

FACILITY REQUIREMENT COMPLIANCE PLAN  
COMMITMENTS AND SCHEDULE

AIR POLLUTION CONTROL PERMIT APPLICATION

Form 4530-133 11-93

Information attached? \_\_ (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis

2. Facility identification number: 341158070

3. For facilities that are presently in compliance with all applicable requirements, including any enhanced monitoring and compliance certification requirements under section 114(a)(3) of the Clean Air Act that apply, complete the following. These commitments are part of the application for Part 70 permits.

☒ We will continue to operate and maintain this facility in compliance with all applicable requirements.

☒ Form 4530-132 includes new requirements that apply or will apply to this facility during the term of the permit. We will meet such requirements on a timely basis.

4. For facilities not presently fully in compliance, complete the following.

☐ This facility is in compliance with all applicable requirements except for those indicated below. We will achieve compliance according to the following schedule:

Applicable Requirement	Corrective Actions	Deadline
1.		
2.		
3.		

Progress reports will be submitted:

Start date: \_\_\_\_\_ and every six (6) months thereafter

State of Wisconsin  
Department of Natural Resources

INDEX OF AIR POLLUTION PERMIT APPLICATION FORMS  
Form 4530-134 12-99

I. ADMINISTRATION		
This application contains the following forms:	<input checked="" type="checkbox"/> Form 4530-100, Facility Identification	
	<input checked="" type="checkbox"/> Form 4530-101, Facility Plot Plan	
	<input checked="" type="checkbox"/> Forms 4530-102, -102A, and -102B, Source and Site Descriptions	
II. EMISSIONS SOURCE DESCRIPTION		
This application contains the following forms:	<input checked="" type="checkbox"/> Form 4530-103, Stack Identification	1
	<input type="checkbox"/> Form 4530-104, Boiler or Furnace Operation	
	<input type="checkbox"/> Form 4530-105, Storage Tanks	
	<input type="checkbox"/> Form 4530-106, Incineration	
	<input type="checkbox"/> Form 4530-107, Printing Operations	
	<input checked="" type="checkbox"/> Form 4530-108, Painting and Coating Operations	1
	<input checked="" type="checkbox"/> Form 4530-109, Miscellaneous Processes	13
III. AIR POLLUTION CONTROL SYSTEM		
This application contains the following forms:	<input checked="" type="checkbox"/> Form 4530-110, Miscellaneous	1
	<input type="checkbox"/> Form 4530-111, Condensers	
	<input type="checkbox"/> Form 4530-112, Adsorbers	
	<input type="checkbox"/> Form 4530-113, Catalytic or Thermal Oxidation	
	<input type="checkbox"/> Form 4530-114, Cyclones/Settling Chambers	
	<input type="checkbox"/> Form 4530-115, Electrostatic Precipitators	
	<input checked="" type="checkbox"/> Form 4530-116, Wet Collection Systems	2
	<input type="checkbox"/> Form 4530-117, Baghouses/Fabric Filters	
IV. COMPLIANCE DEMONSTRATION		
This application contains the following forms: (one for each facility boiler, printing operation, etc.):	<input checked="" type="checkbox"/> Form 4530-118, Compliance Certification - Monitoring and Reporting	5
	<input type="checkbox"/> Form 4530-119, Continuous Emission Monitoring	
	<input type="checkbox"/> Form 4530-120, Periodic Emission Monitoring Using Portable Monitors	
	<input checked="" type="checkbox"/> Form 4530-121, Control System Parameters or Operation Parameters of a Process	3
	<input type="checkbox"/> Form 4530-122, Monitoring Maintenance Procedures	
	<input type="checkbox"/> Form 4530-123, Stack Testing	
	<input type="checkbox"/> Form 4530-124, Fuel Sampling and Analysis	
	<input checked="" type="checkbox"/> Form 4530-125, Recordkeeping	5

V.EMISSION SUMMARY AND COMPLIANCE CERTIFICATION		Total Number of This Form
This application contains the following forms:	<input checked="" type="checkbox"/> Form 4530-126, Emission Unit Hazardous Air Pollutant Summary	1
	<input checked="" type="checkbox"/> Form 4530-127, Facility Hazardous Air Pollutant Summary	1
	<input checked="" type="checkbox"/> Form 4530-128, Emission Unit Summary	1
	<input checked="" type="checkbox"/> Form 4530-129, Facility Emissions Summary	1
	<input checked="" type="checkbox"/> Form 4530-130, Current Emissions Requirements and Status of Unit	4
	<input checked="" type="checkbox"/> Form 4530-131, Emission Unit Compliance Plan - Commitments and Schedule	1
	<input checked="" type="checkbox"/> Form 4530-132, Current Emissions Requirements and Status of Facility	1
	<input checked="" type="checkbox"/> Form 4530-133, Facility Requirement Compliance Plan Commitments and Schedule	1

<b>VI.SIGNATURE OF RESPONSIBLE OFFICIAL</b>	
<p><b>A. STATEMENT OF COMPLETENESS</b></p> <p>I have reviewed this application in its entirety and, based on information and belief formed after reasonable inquiry, I certify that the statements and information contained in this application are true, accurate and complete.</p> <p><b>B. FOR RENEWALS ONLY</b></p> <p>I have reviewed this application, the original operation permit application, and operation permit number(s) _____ in their entirety and, based on information and belief formed after reasonable inquiry, I certify that the statements and information contained in this renewal application are true, accurate and complete.</p> <p><b>C. CERTIFICATION OF FACILITY COMPLIANCE STATUS (check one box only)</b>  <b>THIS IS NOT A REQUIREMENT OF NON-PART 70 SOURCES.</b></p> <p><input checked="" type="checkbox"/> I certify that the facility described in this air pollution permit application is fully in compliance with all applicable requirements.</p> <p><input type="checkbox"/> I certify that the facility described in this air pollution permit application is fully in compliance with all applicable requirements, except for the following emissions unit(s): (list all non-complying units)</p>	
Printed or Typed Name Scott Swosinski	Title Vice President and General Manager
Signature	Date Signed

SEND ALL MATERIALS TO:

WISCONSIN DEPARTMENT OF NATURAL RESOURCES  
BUREAU OF AIR MANAGEMENT  
PERMITS SECTION  
P.O. BOX 7921  
MADISON, WI 53707-7921

V.EMISSION SUMMARY AND COMPLIANCE CERTIFICATION	Total Number of This Form
This application contains the following forms:	<input checked="" type="checkbox"/> Form 4530-126, Emission Unit Hazardous Air Pollutant Summary 1
	<input checked="" type="checkbox"/> Form 4530-127, Facility Hazardous Air Pollutant Summary 1
	<input checked="" type="checkbox"/> Form 4530-128, Emission Unit Summary 1
	<input checked="" type="checkbox"/> Form 4530-129, Facility Emissions Summary 1
	<input checked="" type="checkbox"/> Form 4530-130, Current Emissions Requirements and Status of Unit 4
	<input checked="" type="checkbox"/> Form 4530-131, Emission Unit Compliance Plan - Commitments and Schedule 1
	<input checked="" type="checkbox"/> Form 4530-132, Current Emissions Requirements and Status of Facility 1
	<input checked="" type="checkbox"/> Form 4530-133, Facility Requirement Compliance Plan Commitments and Schedule 1

## VI.SIGNATURE OF RESPONSIBLE OFFICIAL

## A. STATEMENT OF COMPLETENESS

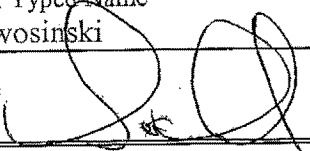
I have reviewed this application in its entirety and, based on information and belief formed after reasonable inquiry, I certify that the statements and information contained in this application are true, accurate and complete.

## B. FOR RENEWALS ONLY

I have reviewed this application, the original operation permit application, and operation permit number(s) \_\_\_\_\_ in their entirety and, based on information and belief formed after reasonable inquiry, I certify that the statements and information contained in this renewal application are true, accurate and complete.

C. CERTIFICATION OF FACILITY COMPLIANCE STATUS (check one box only)  
THIS IS NOT A REQUIREMENT OF NON-PART 70 SOURCES.

- ☒ I certify that the facility described in this air pollution permit application is fully in compliance with all applicable requirements.
- ☐ I certify that the facility described in this air pollution permit application is fully in compliance with all applicable requirements, except for the following emissions unit(s): (list all non-complying units)

Printed or Typed Name Scott Swosinski	Title Vice President and General Manager
Signature 	Date Signed

SEND ALL MATERIALS TO:

WISCONSIN DEPARTMENT OF NATURAL RESOURCES  
BUREAU OF AIR MANAGEMENT  
PERMITS SECTION  
P.O. BOX 7921  
MADISON, WI 53707-7921

State of Wisconsin  
Department of Natural Resources

SUPPLEMENTAL INFORMATION  
AIR POLLUTION CONTROL PERMIT APPLICATION  
Form 4530-135 11-93

Information attached? N (y/n)

SEE INSTRUCTIONS ON REVERSE SIDE

1. Facility name: CLCM St. Francis	2. Facility identification number: 341158070
3. This form supplements Form 4530 - <u>All</u> for Emission Unit (e.g. B01, P01, etc.) <u>All</u>	

Additional Information	Item Number
Tables 1-16 – Emission Calculations	Tables 1-16
Table 17 – Stack Parameters	Table 17

Additional Information (Diagrams)	Item Number

## **TABLES**

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**TABLE 1. Total Emissions  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	TOTAL			
	PTE lb/hr	ton/yr	lb/hr	MTE ton/yr
Volatile Org. Cmpnds. (VOC)	46.82	70.48	46.82	205.06
Carbon Monoxide (CO)	1.27	5.57	1.27	5.57
Nitrogen Oxides (NO <sub>x</sub> )	1.52	6.64	1.52	6.64
Particulates (PM)	0.40	0.98	28.77	47.93
Particulates-10 (PM-10)	0.12	0.50	0.12	0.50
Sulfur Dioxide (SO <sub>2</sub> )	0.01	0.04	0.01	0.04
Lead (Pb)	0.00001	0.00003	0.00001	0.00003
Glycol Ethers (HAP)	2.45	4.06	2.45	10.74
Methylene Chloride (HAP)	25.77	7.22	25.77	112.87
Methanol (HAP)	3.64	1.02	3.64	15.93
Toluene (HAP)	1.82	0.51	1.82	7.96
Sodium Hydroxide (mist)	0.615	1.280	0.615	2.695
Hydrochloric Acid (mist)	0.047	0.097	0.047	0.205
Total HAP	34.34	14.18	34.34	150.40

**TABLE 2. New Wet Caustic Scrubber Emissions - C10  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

PROCESS	EMISSION FACTOR emis./ lb used	SOLUTION STRENGTH %	USAGE			CONTROL EFF. %	TOTAL NaOH		
			lb/mo	PTE gal/yr	lb/yr		PTE/MTE lb/hr	PTE ton/yr	MTE ton/yr
All Units Venting to C10	1.0%	50.0%	42,667	40,000	512,000	0%	0.615	1.280	2.695

1. Potential Operating Hours: 4,160 hr/yr  
2. Maximum Operating Hours: 8,760 hr/yr

**TABLE 4. Water Heater 4 Emissions - P12  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	EMISSION FACTOR lb/mmft <sup>3</sup>	USAGE		TOTAL	
		mmft <sup>3</sup> /hr	PTE/MTE mmft <sup>3</sup> /yr	lb/hr	PTE/MTE ton/yr
CO	84.0	0.0020	17.52	0.168	0.736
NOx	100.0	0.0020	17.52	0.200	0.876
PM	7.6	0.0020	17.52	0.015	0.067
PM-10	7.6	0.0020	17.52	0.015	0.067
SO <sub>2</sub>	0.6	0.0020	17.52	0.001	0.005
VOC	5.5	0.0020	17.52	0.011	0.048
Lead	0.0005	0.0020	17.52	0.000001	0.000004

1. Maximum/Potential Operating Hours: 8,760 hr/yr
2. Maximum Heat Input: 2.0 mmBtu/hr
3. Emission factor reference: U.S. EPA AP-42, Compilation of Air Pollutant Emission Factors, 5th Ed., Table 1.4-1 thru 3.

**TABLE 5. Oil/Water Heater 3 Emissions - P13  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	EMISSION FACTOR lb/mmft <sup>3</sup>	USAGE PTE/MTE mmft <sup>3</sup> /hr	TOTAL PTE/MTE lb/hr	ton/yr
CO	84.0	0.0020	0.168	0.736
NOx	100.0	0.0020	0.200	0.876
PM	7.6	0.0020	0.015	0.067
PM-10	7.6	0.0020	0.015	0.067
SO <sub>2</sub>	0.6	0.0020	0.001	0.005
VOC	5.5	0.0020	0.011	0.048
Lead	0.0005	0.0020	0.000001	0.000004

1. Maximum/Potential Operating Hours: 8,760 hr/yr
2. Maximum Heat Input: 2.0 mmBtu/hr
3. Emission factor reference: U.S. EPA AP-42, Compilation of Air Pollutant Emission Factors, 5th Ed., Table 1.4-1 thru 3.

**TABLE 6. Caustic Heater 2 Emissions - P14  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	EMISSION FACTOR lb/mmft <sup>3</sup>	USAGE PTE/MTE mmft <sup>3</sup> /hr	TOTAL PTE/MTE lb/hr	ton/yr
CO	84.0	0.0036	0.302	1.325
NOx	100.0	0.0036	0.360	1.577
PM	7.6	0.0036	0.027	0.120
PM-10	7.6	0.0036	0.027	0.120
SO <sub>2</sub>	0.6	0.0036	0.002	0.009
VOC	5.5	0.0036	0.020	0.087
Lead	0.0005	0.0036	0.000002	0.000008

1. Maximum/Potential Operating Hours: 8,760 hr/yr
2. Maximum Heat Input: 3.6 mmBtu/hr
3. Emission factor reference: U.S. EPA AP-42, Compilation of Air Pollutant Emission Factors, 5th Ed., Table 1.4-1 thru 3.

**TABLE 7. Caustic Heater 1 and 2,000-Gallon Tank Emissions - P15  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	EMISSION FACTOR lb/mmft <sup>3</sup>	USAGE PTE/MTE mmft <sup>3</sup> /hr	TOTAL PTE/MTE lb/hr	ton/yr
CO	84.0	0.0020	0.168	0.736
NOx	100.0	0.0020	0.200	0.876
PM	7.6	0.0020	0.015	0.067
PM-10	7.6	0.0020	0.015	0.067
SO <sub>2</sub>	0.6	0.0020	0.001	0.005
VOC	5.5	0.0020	0.011	0.048
Lead	0.0005	0.0020	0.000001	0.000004

1. Maximum/Potential Operating Hours: 8,760 hr/yr
2. Maximum Heat Input: 2.0 mmBtu/hr
3. Emission factor reference: U.S. EPA AP-42, Compilation of Air Pollutant Emission Factors, 5th Ed., Table 1.4-1 thru 3.

**TABLE 8. Drying Oven/Flamer Emissions - P41  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	EMISSION FACTOR lb/mmft <sup>3</sup>	USAGE PTE/MTE mmft <sup>3</sup> /hr	TOTAL PTE/MTE lb/hr	ton/yr
CO	84.0	0.0006	0.050	0.221
NOx	100.0	0.0006	0.060	0.263
PM	7.6	0.0006	0.005	0.020
PM-10	7.6	0.0006	0.005	0.020
SO <sub>2</sub>	0.6	0.0006	0.000	0.002
VOC	5.5	0.0006	0.003	0.014
Lead	0.0005	0.0006	0.000000	0.000001

1. Maximum/Potential Operating Hours: 8,760 hr/yr
2. Maximum Heat Input: 0.6 mmBtu/hr
3. Emission factor reference: U.S. EPA AP-42, Compilation of Air Pollutant Emission Factors, 5th Ed., Table 1.4-1 thru 3.

**TABLE 9. Hot Water Heater Emissions - P42C  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	EMISSION FACTOR lb/mmft <sup>3</sup>	USAGE PTE/MTE mmft <sup>3</sup> /hr	TOTAL PTE/MTE lb/hr	ton/yr
CO	84.0	0.0018	0.147	0.644
NOx	100.0	0.0018	0.175	0.767
PM	7.6	0.0018	0.013	0.058
PM-10	7.6	0.0018	0.013	0.058
SO <sub>2</sub>	0.6	0.0018	0.001	0.005
VOC	5.5	0.0018	0.010	0.042
Lead	0.0005	0.0018	0.000001	0.000004

1. Maximum/Potential Operating Hours: 8,760 hr/yr
2. Maximum Heat Input: 1.75 mmBtu/hr
3. Emission factor reference: U.S. EPA AP-42, Compilation of Air Pollutant Emission Factors, 5th Ed., Table 1.4-1 thru 3.

**TABLE 10. Plastic Drum Wipe Cleaning Emissions - P45  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	MATERIAL CONTENT lb/gal	USAGE			PTE/MTE lb/hr	TOTAL	
		PTE gal/hr	PTE gal/mo	MTE gal/yr		PTE ton/yr	MTE ton/yr
VOC	0.42	3.75	650	7,800	1.58	1.64	6.90

1. Potential Operating Hours: 4,160 hr/yr
2. Maximum Operating Hours: 8,760 hr/yr
3. P45 is included to allow for the use of other compliant solvents in addition to the currently used acetone.  
This permit application uses potential VOC emissions calculated based on the misc. industrial solvent cleaning content restriction of 0.42 lb VOC/gal. In recent years, acetone was the only used solvent.

**TABLE 11a. Steel Drum De-Labeling Emissions - P71  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	MATERIAL CONTENT lb/gal	USAGE			PTE/MTE lb/hr	TOTAL PTE ton/yr	MTE ton/yr
		PTE gal/hr	PTE gal/mo	MTE gal/yr			
VOC	0	3.75	650	7,800	0.00	0.00	0.00

1. Potential Operating Hours:
2. Maximum Operating Hours:
3. P71 can only use actone.

4,160 hr/yr  
8,760 hr/yr  
12480

**TABLE 11b. Label Stripping Emissions - P44  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	MATERIAL CONTENT lb/gal	USAGE			PTE/MTE gal/hr	PTE gal/mo	MTE gal/yr	PTE/MTE lb/hr	TOTAL	
									PTE ton/yr	MTE ton/yr
VOC	1.52		140	1,680	3.00		26,280	4.56	1.28	19.97
Methylene Chloride	8.59		140	1,680	3.00		26,280	25.77	7.22	112.87
Methanol	1.21		140	1,680	3.00		26,280	3.64	1.02	15.93
Toluene	0.61		140	1,680	3.00		26,280	1.82	0.51	7.96

1. Potential Operating Hours:

4,160 hr/yr

2. Maximum Operating Hours:

8,760 hr/yr

**TABLE 12. Acidizer Emissions - P75  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	EMISSION FACTOR emis./ lb used	SOLUTION STRENGTH %	USAGE			CONTROL EFF. %	TOTAL HCl		
			lb/mo	PTE gal/yr	MTE lb/yr		PTE/MTE lb/hr	PTE ton/yr	MTE ton/yr
HCl	1.0%	31.45%	5,167	9,538	62,000	0%	0.047	0.097	0.205

1. Potential Operating Hou 4,160 hr/yr
2. Maximum Operating Hoi 8,760 hr/yr
3. The control unit is C70.
4. The received hydrochloric acid is presented as and it says 20 degrees baume hydrochloric acid. The Baume relates density to temperature, so at 20 degrees, the density will be  $145/145-20 = 1.16$  gm/mL (i.e. 31.45% concentration).

**TABLE 13. Shot Blaster Emissions - P76  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

	EMISSION FACTOR lb PM/drum	PTE/MTE		USAGE		CONTROL EFF. %	TOTAL		
		drums/hr	drums/yr	PTE drums/mo	MTE drums/yr		lb/hr	ton/yr	lb/hr MTE ton/yr
PM	0.222	300	104,000	1,248,000	2,628,000	100%			

1. Potential Operating Hours: 4,160 hr/yr
2. Maximum Operating Hours: 8,760 hr/yr
3. The emission factor of 0.222 was based on P31's current permitted levels.
4. The control efficiency is assumed 100% due to venting indoors.

**TABLE 14. Closed Drum Drying Oven Emissions - P50C  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	EMISSION FACTOR lb/mmft <sup>3</sup>	USAGE		TOTAL	
		PTE/MTE mmft <sup>3</sup> /hr	MTE mmft <sup>3</sup> /yr	PTE/MTE lb/hr	MTE ton/yr
CO	84.0	0.0006	5.26	0.050	0.221
NOx	100.0	0.0006	5.26	0.060	0.263
PM	7.6	0.0006	5.26	0.005	0.020
PM-10	7.6	0.0006	5.26	0.005	0.020
SO <sub>2</sub>	0.6	0.0006	5.26	0.000	0.002
VOC	5.5	0.0006	5.26	0.003	0.014
Lead	0.0005	0.0006	5.26	0.000000	0.000001

1. Maximum/Potential Operating Hours: 8,760 hr/yr
2. Maximum Heat Input (P50C alone - P50A and P50B are heated by Boiler B20): 0.60 mmBtu/hr
3. Emission factor reference: U.S. EPA AP-42, Compilation of Air Pollutant Emission Factors, 5th Ed., Table 1.4-1 thru 3.

**TABLE 15. Overspray Filter/Painting Emissions - P32C  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	MATERIAL CONTENT lb/gal	USAGE						TOTAL PTE ton/yr	MTE ton/yr		
		PTE/MTE gal/hr	lb/mo	gal/mo	PTE lb/yr	gal/yr	MTE lb/yr				
VOC Glycol Ethers	3.5	11.60	38,400	3,200	460,800	38,400	1,219,392	101,616	40.60	67.20	177.83
	0.21	11.60	38,400	3,200	460,800	38,400	1,219,392	101,616	2.45	4.06	10.74

POLLUTANT	MATERIAL CONTENT solids/gal	USAGE			TRANS. CONTROL EFFICIENCY %	TOTAL PM		
		PTE/MTE gal/hr	PTE gal/yr	MTE gal/yr		PTE lb/hr	ton/yr	MTE lb/hr ton/yr
PM	4.94	11.60	38,400	38,400	50%	0.29	0.47	28.65
PM-10					99%	0.143	from permit	47.42
PM-2.5						0.14	from permit	

1. Potential Operating Hours: 4,160 hr/yr
2. Maximum Operating Hours: 8,760 hr/yr
3. Includes painting process PP32C - Auto External Drum Spray Booth.
4. The control unit is C32C.
5. The highest value for solids content was used based on currently used paints.
6. The cleaning solvents for P32C can only be acetone or other non-VOC solvents.

**TABLE 16. Curing Oven Emissions - P32B  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated February 2015**

POLLUTANT	EMISSION FACTOR lb/mmft <sup>3</sup>	USAGE PTE/MTE mmft <sup>3</sup> /hr	USAGE PTE/MTE mmft <sup>3</sup> /yr	TOTAL PTE/MTE lb/hr	TOTAL PTE/MTE ton/yr
CO	84.0	0.0026	22.78	0.218	0.957
NOx	100.0	0.0026	22.78	0.260	1.139
PM	7.6	0.0026	22.78	0.020	0.087
PM-10	7.6	0.0026	22.78	0.020	0.087
SO <sub>2</sub>	0.6	0.0026	22.78	0.002	0.007
VOC	5.5	0.0026	22.78	0.014	0.063
Lead	0.0005	0.0026	22.78	0.000001	0.000006

1. Maximum/Potential Operating Hours: 8,760 hr/yr
2. Maximum Heat Input (all units combined): 2.6 mmBtu/hr
3. Emission factor reference: U.S. EPA AP-42, Compilation of Air Pollutant Emission Factors, 5th Ed., Table 1.4-1 thru 3.
4. Includes combustion emissions from P32B - Internal Drum/Lid Lining Cure Oven.

TABLE 17. Stack Parameters  
CLCM / MASD / Kitzinger, Pennsylvania Ave. - Updated

Stack ID	Exhaust/ Process- Control Unit	Process Name	Stack/ Fugitive	Discharge Height (ft)	Inside Dimensions/ Stack Diameter	Exhaust/Stack Flow Rate		Exhaust Gas Temp. (Degrees F)	Exhaust Gas Discharge Direction	Obstruction (yes/no)
						Normal (ACFM)	Maximum (ACFM)			
S98	C10	New Wet Scrubber	Stack	43	9.5	47,000	47,000	90	Up	No
Into C10	C70-P75	Acid Scrubber								
S44 (lug)	P44	Label Stripping	Fugitive	Fugitive				70		
S92	P12	Water Heater 4	Stack	25	0.67	350	350	550	Up	Yes (rainhat)
S93	P13	Oil/Water Heater 3	Stack	25	0.67	350	350	550	Up	Yes (rainhat)
S94	P14	Caustic Heater 2	Stack	25	1.00	600	600	675	Up	Yes (rainhat)
S95	P15	Caustic Heater 1 and 2,000-Gallon Tank	Stack	25	0.67	350	350	550	Up	Yes (rainhat)
S96	P41	Replacement Drying Oven	Stack	28	1.00	Natural	Natural	190	Up	No
S62	P42C	Drum Caustic Pre-Flush - Hot Water Heater	Stack	28	0.67	250	250	300	Up	Yes (rainhat)
S45 (lug)	P45	Drum Wipe Cleaning	Fugitive	Fugitive				70		
S91 (lug)	P71	De-Labeling (Steel Only)	Fugitive	Fugitive				70		
S53	P50C	Closed Drum Drying Oven	Stack	35	1.00	2,700	2,700	170	Up	No
S12C	C32C	Overspray Filters	Stack	35	2.17	15,000	15,000	150	Up	No
S12B	P32B	Curing Oven	Stack	35	1.33	1,640	1,640	350	Up	Yes (rainhat)

